South Dakota Medicaid Physician Services Fee Schedule

Effective July 1, 2023 Updated April 9, 2024

Providers must bill for services at their usual and customary charge. The fee listed below is the maximum allowable amount a provider may be reimbursed. Providers must append applicable modifiers to procedure codes. A list of authorized modifiers and payment effects is available at: https://dss.sd.gov/docs/medicaid/modifiers.pdf.

Providers should refer to South Dakota Medicaid's provider manual webpage for applicable coverage criteria and claim instructions: https://dss.sd.gov/medicaid/providers/billingmanuals/. For information regarding requesting a coverage or rate change refer to the Reconsideration, Reviews, Coverage Requests, and Fair Hearing provider manual. **Changes to current fees are indicated in red**

The rate of payment for "Price by Report" is generally 40% of the usual and customary charge as established in ARSD 67:16:02:03.

	Description	Fee
1999	Unlisted Anesthesia Procedure(S)	Price By Report
10004	Fine Needle Aspiration Of Additional Lesion	\$47.03
	Fine Needle Aspiration Of First Lesion Using Ultrasound Guidance	\$145.31
10006	Fine Needle Aspiration Of Additional Lesion Using Ultrasound Guidance	\$62.31
	Fine Needle Aspiration Of First Lesion Using Fluoroscopic Guidance	\$290.71
	Fine Needle Aspiration Of Additional Lesion Using Fluoroscopic Guidance	\$158.55
10009	Fine Needle Aspiration Of First Lesion Using Ct Guidance	\$321.99
10010	Fine Needle Aspiration Of Additional Lesion Using Ct Guidance	\$257.32
10011	Fine Needle Aspiration Of First Lesion Using Mr Guidance	\$166.77
10012	Fine Needle Aspiration Of Additional Lesion Using Mr Guidance	\$166.77
10021	Fine Needle Aspiration Of First Lesion	\$106.89
10030	Drainage Of Fluid Collection In Soft Tissue Using Imaging Guidance	\$679.51
10035	Placement Of Soft Tissue Locating Device Using X-Ray, First Growth	\$409.48
	Placement Of Soft Tissue Locating Device Using X-Ray, Each Additional Growth	\$308.54
	Acne Surgery (Eg, Marsupialization, Opening Or Removal Of Multiple Milia, Comedones, Cysts, Pustules)	\$99.05
	Simple Or Single Drainage Of Skin Abscess	\$108.19
	Complicated Or Multiple Drainage Of Skin Abscess	\$193.46
	Simple Drainage Of Cyst Of Tailbone	\$181.77
	Complicated Drainage Of Cyst Of Tailbone	\$244.67
	Removal Of Foreign Body From Tissue, Accessed Beneath The Skin, Simple	\$159.21
	Removal Of Foreign Body From Tissue, Accessed Beneath The Skin, Complex	\$266.11
	Drainage Of Blood Or Fluid Accumulation	· · · · · · · · · · · · · · · · · · ·
	Aspiration Of Abscess, Blood, Or Cyst	\$179.25
		\$125.24
	Complex Drainage Of Wound Infection After Surgery	\$235.90
	Removal Of Inflamed Or Infected Skin, Up To 10% Of Body Surface	\$55.51
	Removal Of Inflamed Or Infected Skin, Each Additional 10% Of Body Surface Or Less	\$24.98
	Removal Of Infected Skin, Tissue Or Muscle Of Genitals	\$561.69
	Removal Of Infected Skin, Tissue Or Muscle Of Abdomen	\$754.55
	Removal Of Infected Skin, Tissue Or Muscle Of Genitals, Perineum, Or Abdomen	\$687.39
11008	Removal Of Infected Artificial Material Or Mesh From Abdomen	\$238.95
	Debridement Including Removal Of Foreign Material At The Site Of An Open Fracture And/Or An Open Dislocation (Eg, Excisional	
	Debridement); Skin And Subcutaneous Tissues	\$468.80
	Removal Of Foreign Material From Skin, Tissue, And Muscle At Open Fracture And/Or Dislocation	\$519.71
	Removal Of Foreign Material From Skin, Tissue, Muscle, And Bone At Open Fracture And/Or Dislocation	
	Removal Of Skin And Tissue, 20.0 Sq Cm Or Less	\$90.93
	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less	\$90.93
	·	\$90.93 \$241.72
11044	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less	\$90.93 \$241.72 \$287.75
11044 11045	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less	\$90.93 \$241.72 \$287.75 \$41.83
11044 11045 11046	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47
11044 11045 11046 11047	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65
11044 11045 11046 11047 11055	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65
11044 11045 11046 11047 11055 11056	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18
11044 11045 11046 11047 11055 11056 11057	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.03
11044 11045 11046 11047 11055 11056 11057 11102	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.03 \$71.10
11044 11045 11046 11047 11055 11056 11057 11102 11103	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths Tangential Biopsy Of Single Skin Lesion	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.03 \$71.10
11044 11045 11046 11047 11055 11056 11057 11102 11103 11104	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths Tangential Biopsy Of Single Skin Lesion Tangential Biopsy Of Additional Skin Lesion	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.03 \$71.10 \$98.65 \$35.83
11044 11045 11046 11047 11055 11056 11057 11102 11103 11104 11105	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths Tangential Biopsy Of Single Skin Lesion Punch Biopsy Of Single Skin Lesion Punch Biopsy Of Additional Skin Lesion Punch Biopsy Of Additional Skin Lesion	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.03 \$71.10 \$98.65 \$35.83 \$98.65 \$41.66
11044 11045 11046 11047 11055 11056 11057 11102 11103 11104 11105 11106	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths Tangential Biopsy Of Single Skin Lesion Punch Biopsy Of Single Skin Lesion Punch Biopsy Of Additional Skin Lesion Incisional Biopsy Of Single Skin Lesion	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.03 \$71.10 \$98.65 \$35.83 \$98.65 \$41.66
11044 11045 11046 11047 11055 11056 11057 11102 11103 11104 11105 11106 11107	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths Tangential Biopsy Of Single Skin Lesion Tangential Biopsy Of Additional Skin Lesion Punch Biopsy Of Single Skin Lesion Punch Biopsy Of Single Skin Lesion Incisional Biopsy Of Single Skin Lesion Incisional Biopsy Of Additional Skin Lesion	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.03 \$71.10 \$98.65 \$35.83 \$98.65 \$41.66 \$110.75
11044 11045 11046 11047 11055 11056 11057 11102 11103 11104 11104 11105 11106	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths Tangential Biopsy Of Single Skin Lesion Tangential Biopsy Of Single Skin Lesion Punch Biopsy Of Single Skin Lesion Incisional Biopsy Of Single Skin Lesion Incisional Biopsy Of Single Skin Lesion Incisional Biopsy Of Additional Skin Lesion Removal Of Skin Tag, 1-15 Skin Tags	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.03 \$71.10 \$98.65 \$35.83 \$98.65 \$41.66 \$110.75 \$64.22
11044 11045 11046 11047 11055 11056 11057 11102 11103 11104 11105 11106 11107 11200	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths Tangential Biopsy Of Single Skin Lesion Tangential Biopsy Of Additional Skin Lesion Punch Biopsy Of Single Skin Lesion Incisional Biopsy Of Additional Skin Lesion Incisional Biopsy Of Single Skin Lesion Incisional Biopsy Of Additional Skin Lesion Removal Of Skin Tag, 1-15 Skin Tags Removal Of Skin Tag, Each Additional 10 Skin Tags	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.03 \$71.10 \$98.65 \$35.83 \$98.65 \$41.66 \$110.75 \$64.22
11044 11045 11046 11047 11055 11056 11057 11102 11103 11104 11105 11106 11107 11200 11201 11300	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths Tangential Biopsy Of Single Skin Lesion Tangential Biopsy Of Single Skin Lesion Punch Biopsy Of Single Skin Lesion Punch Biopsy Of Additional Skin Lesion Incisional Biopsy Of Additional Skin Lesion Incisional Biopsy Of Additional Skin Lesion Removal Of Skin Tag, 1-15 Skin Tags Removal Of Skin Tag, Each Additional 10 Skin Tags Shaving Of 0.5 Centimeters Or Less Skin Growth Of The Trunk, Arms, Or Legs	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.03 \$71.10 \$98.65 \$35.83 \$98.65 \$41.66 \$110.75 \$64.22 \$78.14
11044 11045 11046 11047 11055 11056 11057 11102 11103 11104 11105 11106 11107 11201 11300 11301	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths Tangential Biopsy Of Single Skin Lesion Tangential Biopsy Of Additional Skin Lesion Punch Biopsy Of Single Skin Lesion Punch Biopsy Of Additional Skin Lesion Incisional Biopsy Of Additional Skin Lesion Incisional Biopsy Of Additional Skin Lesion Removal Of Skin Tag, 1-15 Skin Tags Removal Of Skin Tag, 2-15 Skin Tags Shaving Of 0.5 Centimeters Or Less Skin Growth Of The Trunk, Arms, Or Legs Shaving Of 0.6 Centimeters To 1.0 Centimeters Skin Growth Of The Trunk, Arms, Or Legs	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.65 \$31.83 \$98.65 \$41.66 \$110.75 \$64.22 \$778.14 \$18.67 \$72.28
11044 11045 11046 11047 11055 11056 11057 11102 11103 11104 11105 11106 11107 11200 11201 11300 11301	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths Tangential Biopsy Of Single Skin Lesion Tangential Biopsy Of Single Skin Lesion Punch Biopsy Of Single Skin Lesion Punch Biopsy Of Additional Skin Lesion Incisional Biopsy Of Additional Skin Lesion Incisional Biopsy Of Additional Skin Lesion Removal Of Skin Tag, 1-15 Skin Tags Removal Of Skin Tag, 1-25 Skin Tags Removal Of Skin Tag, Each Additional 10 Skin Tags Shaving Of 0.5 Centimeters Or Less Skin Growth Of The Trunk, Arms, Or Legs Shaving Of 0.6 Centimeters Skin Growth Of The Trunk, Arms, Or Legs	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.03 \$71.10 \$98.65 \$35.83 \$98.65 \$41.66 \$110.75 \$64.22 \$78.14 \$18.67 \$72.28 \$99.54
11044 11045 11046 11047 11055 11056 11057 11102 11103 11104 11105 11106 11107 11200 11201 11301 11301 11302 11303	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths Tangential Biopsy Of Single Skin Lesion Tangential Biopsy Of Single Skin Lesion Punch Biopsy Of Single Skin Lesion Punch Biopsy Of Single Skin Lesion Incisional Biopsy Of Single Skin Lesion Incisional Biopsy Of Additional Skin Lesion Incisional Biopsy Of Additional Skin Lesion Removal Of Skin Tag, 1-15 Skin Tags Removal Of Skin Tag, 1-15 Skin Tags Shaving Of 0.5 Centimeters Or Less Skin Growth Of The Trunk, Arms, Or Legs Shaving Of 0.6 Centimeters Skin Growth Of The Trunk, Arms, Or Legs Shaving Of Over 2.0 Centimeters Skin Growth Of The Trunk, Arms, Or Legs	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.03 \$71.10 \$98.65 \$35.83 \$98.65 \$41.66 \$110.75 \$64.22 \$78.14 \$18.67 \$72.28 \$92.56
11044 11045 11046 11047 11055 11056 11057 11102 11103 11104 11106 11107 11200 11201 11300 11301 11303 11303	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths Tangential Biopsy Of Single Skin Lesion Punch Biopsy Of Single Skin Lesion Punch Biopsy Of Single Skin Lesion Punch Biopsy Of Single Skin Lesion Incisional Biopsy Of Single Skin Lesion Incisional Biopsy Of Single Skin Lesion Removal Of Skin Tag, 1-15 Skin Tags Removal Of Skin Tag, 1-15 Skin Tags Removal Of Skin Tag, Each Additional 10 Skin Tags Shaving Of 0.5 Centimeters Or Less Skin Growth Of The Trunk, Arms, Or Legs Shaving Of 1.1 To 2.0 Centimeters Skin Growth Of The Trunk, Arms, Or Legs Shaving Of Over 2.0 Centimeters Skin Growth Of The Trunk, Arms, Or Legs Shaving Of Over 2.0 Centimeters Skin Growth Of The Trunk, Arms, Or Legs Shaving Of 0.5 Centimeters Skin Growth Of The Trunk, Arms, Or Legs Shaving Of Over 2.0 Centimeters Skin Growth Of The Trunk, Arms, Or Legs Shaving Of Over 2.0 Centimeters Skin Growth Of The Trunk, Arms, Or Legs	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.03 \$71.10 \$98.65 \$35.83 \$98.65 \$41.66 \$110.75 \$64.22 \$78.14 \$18.67 \$72.28 \$92.54 \$97.56
11044 11045 11046 11047 11055 11056 11057 11102 11103 11104 11105 11106 11106 11106 11300 11301 11303 11303 11305 11306	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths Tangential Biopsy Of Single Skin Lesion Tangential Biopsy Of Additional Skin Lesion Punch Biopsy Of Single Skin Lesion Punch Biopsy Of Single Skin Lesion Incisional Biopsy Of Migle Skin Lesion Incisional Biopsy Of Additional Skin Lesion Removal Of Skin Tag, 1-15 Skin Tags Removal Of Skin Tag, 1-15 Skin Tags Removal Of Skin Tag, Each Additional 10 Skin Tags Shaving Of 0.5 Centimeters Or Less Skin Growth Of The Trunk, Arms, Or Legs Shaving Of 1.6 Centimeters Skin Growth Of The Trunk, Arms, Or Legs Shaving Of Over 2.0 Centimeters Skin Growth Of The Trunk, Arms, Or Legs Shaving Of Over 2.0 Centimeters Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals Shaving Of 0.6 Centimeters To 1.0 Centimeters Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.03 \$71.10 \$98.65 \$35.83 \$98.65 \$41.66 \$110.75 \$64.22 \$78.14 \$18.67 \$72.28 \$92.54 \$97.56 \$129.55 \$75.73
11044 11045 11046 11047 11055 11105 11102 11103 11104 11105 11106 11107 11200 11201 11301 11302 11303 11305 11306 11307	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Bone, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Tangential Biopsy Of Single Skin Lesion Tangential Biopsy Of Single Skin Lesion Punch Biopsy Of Single Skin Lesion Punch Biopsy Of Single Skin Lesion Incisional Biopsy Of Additional Skin Lesion Incisional Biopsy Of Single Skin Lesion Incisional Biopsy Of Single Skin Lesion Incisional Biopsy Of Single Skin Lesion Incisional Biopsy Of Additional Skin Lesion Incisional Biopsy Of Schrimeters Or Less Skin Growth Of The Trunk, Arms, Or Legs Shaving Of 0.5 Centimeters To 1.0 Centimeters Skin Growth Of The Trunk, Arms, Or Legs Shaving Of Over 2.0 Centimeters Skin Growth Of The Trunk, Arms, Or Legs Shaving Of Over 2.0 Centimeters Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals Shaving Of 1.1 To 2.0 Centimeters Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals	\$702.86 \$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.03 \$71.10 \$98.65 \$35.83 \$98.65 \$41.66 \$110.75 \$64.22 \$78.14 \$18.67 \$72.28 \$92.54 \$97.56 \$129.55 \$75.73
11044 11045 11046 11047 11055 11056 11057 11102 11103 11104 11105 11106 11107 11200 11201 11300 11301 11302 11303 11303 11303 11306 11307 11308	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less Removal Of Bone, Each Additional 20.0 Sq Cm Or Less Removal Of Noncancer Thickened Skin Growth, 1 Growth Removal Of Noncancer Thickened Skin Growth, 2-4 Growths Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths Tangential Biopsy Of Single Skin Lesion Tangential Biopsy Of Additional Skin Lesion Punch Biopsy Of Single Skin Lesion Punch Biopsy Of Single Skin Lesion Incisional Biopsy Of Migle Skin Lesion Incisional Biopsy Of Additional Skin Lesion Removal Of Skin Tag, 1-15 Skin Tags Removal Of Skin Tag, 1-15 Skin Tags Removal Of Skin Tag, Each Additional 10 Skin Tags Shaving Of 0.5 Centimeters Or Less Skin Growth Of The Trunk, Arms, Or Legs Shaving Of 1.6 Centimeters Skin Growth Of The Trunk, Arms, Or Legs Shaving Of Over 2.0 Centimeters Skin Growth Of The Trunk, Arms, Or Legs Shaving Of Over 2.0 Centimeters Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals Shaving Of 0.6 Centimeters To 1.0 Centimeters Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals	\$90.93 \$241.72 \$287.75 \$41.83 \$74.47 \$121.65 \$51.18 \$59.03 \$71.10 \$98.65 \$35.83 \$98.65 \$41.66 \$110.75 \$64.22 \$78.14 \$18.67 \$72.28 \$92.54 \$97.56 \$129.55 \$75.73

Tout In the	F
Code Description 11311 Shaving Of 0.6 Centimeters To 1.0 Centimeters Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth	Fee \$106.05
11312 Shaving Of 1.1 To 2.0 Centimeters Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth	\$106.05 \$125.16
11313 Shaving Of Over 2.0 Centimeters Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth	\$162.53
11400 Removal Of Growth (0.5 Centimeters Or Less) Of The Trunk, Arms Or Legs	\$126.76
11401 Removal Of Growth (0.6 To 1.0 Centimeters) Of The Trunk, Arms, Or Legs	\$144.88
11402 Removal Of Growth (1.1 To 2.0 Centimeters) Of The Trunk, Arms, Or Legs	\$170.09
11403 Removal Of Growth (2.1 To 3.0 Centimeters) Of The Trunk, Arms, Or Legs	\$185.23
11404 Removal Of Growth (3.1 To 4.0 Centimeters) Of The Trunk, Arms, Or Legs	\$155.36
11406 Removal Of Growth (4.0 Centimeters) Of The Trunk, Arms, Or Legs	\$294.09
11420 Removal Of Growth (0.5 Centimeters Or Less) Of The Scalp, Neck, Hands, Feet, Or Genitals	\$120.63
11421 Removal Of Growth (0.6 To 1.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals	\$154.86
11422 Removal Of Growth (1.1 To 2.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals	\$173.64
11423 Removal Of Growth (2.1 To 3.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals 11424 Removal Of Growth (3.1 To 4.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals	\$143.19
11426 Removal Of Growth (Over 4.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals	\$166.05 \$227.72
11440 Removal Of Growth (0.5 Centimeters Or Less) Of The Face, Ears, Eyelids, Nose, Lips, Or Mouth	\$142.83
11441 Removal Of Growth (0.6 To 1.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Lips, Or Mouth	\$169.25
11442 Removal Of Growth (1.1 To 2.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Lips, Or Mouth	\$189.80
11443 Removal Of Growth (2.1 To 3.0 Centimeters) Of Face, Ears, Eyelids, Nose, Lips, Or Mouth	\$172.33
11444 Removal (3.1 To 4.0 Centimeters) Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth	\$195.68
11446 Removal (Over 4.0 Centimeters) Growth Of The Face, Ears, Eyelids, Nose, Lips, Or Mouth	\$336.91
11450 Removal Of Skin And Tissue Of Underarms For Inflamed Sweat Glands With Simple Or Intermediate Repair	\$302.89
11451 Removal Of Skin And Tissue Of Underarms For Inflamed Sweat Glands With Complex Repair	\$366.60
11462 Removal Of Skin And Tissue Of Groin For Inflamed Sweat Glands With Simple Or Intermediate Repair	\$402.21
11463 Removal Of Skin And Tissue Of Groin For Inflamed Sweat Glands With Complicated Repair	\$372.91
11470 Removal Of Skin And Tissue Of Anus Or Navel For Inflamed Sweat Glands With Simple Or Intermediate Repair	\$406.03
11471 Removal Of Skin And Tissue Of Anus Or Navel For Inflamed Sweat Glands With Complicated Repair	\$479.48
11600 Removal Of Malignant Growth (0.5 Centimeters Or Less) Of The Trunk, Arms, Or Legs	\$188.79
11601 Removal Of Malignant Growth (0.6 To 1.0 Centimeters) Of The Trunk, Arms, Or Legs	\$217.37
11602 Removal Of Malignant Growth (1.1 To 2.0 Centimeters) Of The Trunk, Arms, Or Legs	\$174.10
11603 Removal Of Malignant Growth (2.1 To 3.0 Centimeters) Of The Trunk, Arms, Or Legs	\$192.93
11604 Removal Of Malignant Growth (3.1 To 4 Centimeters) Of The Trunk, Arms, Or Legs	\$222.86
11606 Removal Of Malignant Growth (Over 4.0 Centimeters) Of The Trunk, Arms, Or Legs	\$392.58
11620 Removal Of Malignant Growth (0.5 Centimeters Or Less) Of The Scalp, Neck, Hands, Feet, Or Genitals	\$177.81
11621 Removal Of Malignant Growth (0.6 To 1.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals	\$218.02
11622 Removal Of Malignant Growth (1.1 To 2.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals	\$239.52
11623 Removal Of Malignant Growth (2.1 To 3.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals	\$279.13
11624 Removal Of Malignant Growth (3.1 To 4 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals	\$316.68
11626 Removal Of Malignant Growth (Over 4.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals 11640 Removal Of Malignant Growth (0.5 Centimeters Or Less) Of The Face, Ears, Eyelids, Nose, Or Lips	\$322.17 \$194.02
11641 Removal Of Malignant Growth (0.6 To 1.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Or Lips	\$234.95
11642 Removal Of Malignant Growth (1.1 To 2.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Or Lips	\$264.73
11643 Removal Of Malignant Growth (2.1 To 3.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Or Lips	\$296.59
11644 Removal Of Malignant Growth (3.1 To 4.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Or Lips	\$364.26
11646 Removal Of Malignant Growth (Over 4.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Or Lips	\$442.82
11720 Debridement Of Nail(S) By Any Method(S); One To Five	\$31.01
11721 Debridement Of Nail(S) By Any Method(S); Six Or More	\$44.04
11730 Separation Of Single Nail Plate From Nail Bed	\$99.63
11732 Separation Of Additional Nail Plate From Nail Bed	\$26.88
11740 Evacuation Of Subungual Hematoma	\$44.08
11750 Removal Of Nail	\$170.11
11755 Biopsy Of Nail Unit (Eg, Plate, Bed, Matrix, Hyponychium, Proximal And Lateral Nail Folds) (Separate Procedure)	\$96.13
11760 Repair Of Nail Bed	\$195.03
11762 Reconstruction Of Nail Bed With Graft	\$275.95
11765 Removal Of Skin Of Finger Or Toe Nail	\$123.43
11770 Removal Of Tailbone Cyst, Simple	\$323.58
11771 Removal Of Tailbone Cyst, Extensive	\$434.22
11772 Removal Of Tailbone Cyst, Complicated 11900 Injection, Intralesional; Up To And Including Seven Lesions	\$535.34
11900 Injection, Intralesional; Up 10 And Including Seven Lesions 11901 Injection, Intralesional; More Than Seven Lesions	\$54.41 \$68.03
	\$68.03
Tattoping Introduction Of Insoluble Opaque Pigments To Correct Color Defects Of Skin, Including Micronigments ion: 6.0.53 Cm	\$183.91
Tattooing, Intradermal Introduction Of Insoluble Opaque Pigments To Correct Color Defects Of Skin, Including Micropigmentation; 6.0 Sq Cm	
11920 Or Less	\$204.11
11920 Or Less 11921 Introduction Of Pigment Into Skin (6.1 To 20.0 Sq Cm) To Correct Color Defect	\$204.11
11920 Or Less	\$204.11 \$60.51
11920 Or Less 11921 Introduction Of Pigment Into Skin (6.1 To 20.0 Sq Cm) To Correct Color Defect Tattooing, Intradermal Introduction Of Insoluble Opaque Pigments To Correct Color Defects Of Skin, Including Micropigmentation; Each	
11920 Or Less 11921 Introduction Of Pigment Into Skin (6.1 To 20.0 Sq Cm) To Correct Color Defect Tattooing, Intradermal Introduction Of Insoluble Opaque Pigments To Correct Color Defects Of Skin, Including Micropigmentation; Each 11922 Additional 20.0 Sq Cm, Or Part Thereof (List Separately In Addition To Code For Primary Procedure)	\$60.51
11920 Or Less 11921 Introduction Of Pigment Into Skin (6.1 To 20.0 Sq Cm) To Correct Color Defect Tattooing, Intradermal Introduction Of Insoluble Opaque Pigments To Correct Color Defects Of Skin, Including Micropigmentation; Each 11922 Additional 20.0 Sq Cm, Or Part Thereof (List Separately In Addition To Code For Primary Procedure) 11950 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 1 Cc Or Less	\$60.51 \$74.52
11920 Or Less 11921 Introduction Of Pigment Into Skin (6.1 To 20.0 Sq Cm) To Correct Color Defect Tattooing, Intradermal Introduction Of Insoluble Opaque Pigments To Correct Color Defects Of Skin, Including Micropigmentation; Each 11922 Additional 20.0 Sq Cm, Or Part Thereof (List Separately In Addition To Code For Primary Procedure) 11950 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 1 Cc Or Less 11951 Injection Of 1.1 To 5.0 Cc Filling Material, Beneath The Skin 11952 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 5.1 To 10.0 Cc 11954 Injection Of Over 10.0 Cc Filling Material, Beneath The Skin	\$60.51 \$74.52 \$99.30
11920 Or Less 11921 Introduction Of Pigment Into Skin (6.1 To 20.0 Sq Cm) To Correct Color Defect Tattooing, Intradermal Introduction Of Insoluble Opaque Pigments To Correct Color Defects Of Skin, Including Micropigmentation; Each Additional 20.0 Sq Cm, Or Part Thereof (List Separately In Addition To Code For Primary Procedure) 11950 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 1 Cc Or Less 11951 Injection Of 1.1 To 5.0 Cc Filling Material, Beneath The Skin 11952 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 5.1 To 10.0 Cc 11954 Injection Of Over 10.0 Cc Filling Material, Beneath The Skin 11960 Insertion Of Tissue Expander(S) For Other Than Breast, Including Subsequent Expansion	\$60.51 \$74.52 \$99.30 \$132.36
11920 Or Less 11921 Introduction Of Pigment Into Skin (6.1 To 20.0 Sq Cm) To Correct Color Defect Tattooing, Intradermal Introduction Of Insoluble Opaque Pigments To Correct Color Defects Of Skin, Including Micropigmentation; Each Additional 20.0 Sq Cm, Or Part Thereof (List Separately In Addition To Code For Primary Procedure) 11950 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 1 Cc Or Less 11951 Injection Of 1.1 To 5.0 Cc Filling Material, Beneath The Skin 11952 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 5.1 To 10.0 Cc 11954 Injection Of Over 10.0 Cc Filling Material, Beneath The Skin 11960 Insertion Of Tissue Expander(S) For Other Than Breast, Including Subsequent Expansion 11970 Replacement Of Tissue Expander With Permanent Implant	\$60.51 \$74.52 \$99.30 \$132.36 \$145.78 \$687.99 \$570.80
11920 Or Less 11921 Introduction Of Pigment Into Skin (6.1 To 20.0 Sq Cm) To Correct Color Defect Tattooing, Intradermal Introduction Of Insoluble Opaque Pigments To Correct Color Defects Of Skin, Including Micropigmentation; Each 11922 Additional 20.0 Sq Cm, Or Part Thereof (List Separately In Addition To Code For Primary Procedure) 11950 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 1 Cc Or Less 11951 Injection Of 1.1 To 5.0 Cc Filling Material, Beneath The Skin 11952 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 5.1 To 10.0 Cc 11954 Injection Of Over 10.0 Cc Filling Material, Beneath The Skin 11960 Insertion Of Tissue Expander(S) For Other Than Breast, Including Subsequent Expansion 11970 Replacement Of Tissue Expander With Permanent Implant 11971 Removal Of Tissue Expanders	\$60.51 \$74.52 \$99.30 \$132.36 \$145.78 \$687.99 \$570.80 \$369.42
11920 Or Less 11921 Introduction Of Pigment Into Skin (6.1 To 20.0 Sq Cm) To Correct Color Defect Tattooing, Intradermal Introduction Of Insoluble Opaque Pigments To Correct Color Defects Of Skin, Including Micropigmentation; Each 11922 Additional 20.0 Sq Cm, Or Part Thereof (List Separately In Addition To Code For Primary Procedure) 11950 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 1 Cc Or Less 11951 Injection Of 1.1 To 5.0 Cc Filling Material, Beneath The Skin 11952 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 5.1 To 10.0 Cc 11954 Injection Of Over 10.0 Cc Filling Material, Beneath The Skin 11960 Insertion Of Tissue Expander(S) For Other Than Breast, Including Subsequent Expansion 11970 Replacement Of Tissue Expander With Permanent Implant 11971 Removal Of Tissue Expanders 11976 Removal, Implantable Contraceptive Capsules	\$60.51 \$74.52 \$99.30 \$132.36 \$145.78 \$687.99 \$570.80 \$369.42 \$147.95
11920 Or Less 11921 Introduction Of Pigment Into Skin (6.1 To 20.0 Sq Cm) To Correct Color Defect Tattooing, Intradermal Introduction Of Insoluble Opaque Pigments To Correct Color Defects Of Skin, Including Micropigmentation; Each 11922 Additional 20.0 Sq Cm, Or Part Thereof (List Separately In Addition To Code For Primary Procedure) 11950 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 1 Cc Or Less 11951 Injection Of 1.1 To 5.0 Cc Filling Material, Beneath The Skin 11952 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 5.1 To 10.0 Cc 11954 Injection Of Over 10.0 Cc Filling Material, Beneath The Skin 11960 Insertion Of Tissue Expander(S) For Other Than Breast, Including Subsequent Expansion 11970 Replacement Of Tissue Expander With Permanent Implant 11971 Removal Of Tissue Expanders 11976 Removal, Implantable Contraceptive Capsules 11980 Subcutaneous Hormone Pellet Implantation (Implantation Of Estradiol And/Or Testosterone Pellets Beneath The Skin)	\$60.51 \$74.52 \$99.30 \$132.36 \$145.78 \$687.99 \$570.80 \$369.42 \$147.95 \$87.05
11920 Or Less 11921 Introduction Of Pigment Into Skin (6.1 To 20.0 Sq Cm) To Correct Color Defect Tattooing, Intradermal Introduction Of Insoluble Opaque Pigments To Correct Color Defects Of Skin, Including Micropigmentation; Each 11922 Additional 20.0 Sq Cm, Or Part Thereof (List Separately In Addition To Code For Primary Procedure) 11950 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 1 Cc Or Less 11951 Injection Of 1.1 To 5.0 Cc Filling Material, Beneath The Skin 11952 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 5.1 To 10.0 Cc 11954 Injection Of Over 10.0 Cc Filling Material, Beneath The Skin 11960 Insertion Of Tissue Expander(S) For Other Than Breast, Including Subsequent Expansion 11970 Replacement Of Tissue Expander With Permanent Implant 11971 Removal Of Tissue Expanders 11976 Removal, Implantable Contraceptive Capsules 11980 Subcutaneous Hormone Pellet Implantation (Implantation Of Estradiol And/Or Testosterone Pellets Beneath The Skin) 11981 Insertion, Non-Biodegradable Drug Delivery Implant	\$60.51 \$74.52 \$99.30 \$132.36 \$145.78 \$687.99 \$570.80 \$369.42 \$147.95 \$87.05
11920 Or Less 11921 Introduction Of Pigment Into Skin (6.1 To 20.0 Sq Cm) To Correct Color Defect Tattooing, Intradermal Introduction Of Insoluble Opaque Pigments To Correct Color Defects Of Skin, Including Micropigmentation; Each 11922 Additional 20.0 Sq Cm, Or Part Thereof (List Separately In Addition To Code For Primary Procedure) 11950 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 1 Cc Or Less 11951 Injection of 1.1 To 5.0 Cc Filling Material, Beneath The Skin 11952 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 5.1 To 10.0 Cc 11954 Injection Of Over 10.0 Cc Filling Material, Beneath The Skin 11960 Insertion Of Tissue Expander(S) For Other Than Breast, Including Subsequent Expansion 11970 Replacement Of Tissue Expander With Permanent Implant 11971 Removal Of Tissue Expanders 11976 Removal, Implantable Contraceptive Capsules 11980 Subcutaneous Hormone Pellet Implantation (Implantation Of Estradiol And/Or Testosterone Pellets Beneath The Skin)	\$60.51 \$74.52 \$99.30 \$132.36 \$145.78 \$687.99 \$570.80 \$369.42 \$147.95 \$87.05

Code Description	Fee
12001 Repair Of Wound (2.5 Centimeters Or Less) Of The Scalp, Neck, Underarms, Trunk, Arms And/Or Legs 12002 Repair Of Wound (2.6 To 7.5 Centimeters) Of The Scalp, Neck, Underarms, Genitals, Trunk, Arms And/Or Legs	\$97.71 \$117.23
12004 Repair Of Wound (7.6 To 12.5 Centimeters) Of The Scalp, Neck, Underarms, Genitals, Trunk, Arms And/Or Legs	\$135.67
12005 Repair Of Wound (12.6 To 20.0 Centimeters) Of The Scalp, Neck, Underarms, Genitals, Trunk, Arms And/Or Legs	\$182.61
12006 Repair Of Wound (20.1 To 30.0 Centimeters) Of The Scalp, Neck, Underarms, Genitals, Trunk, Arms And/Or Legs	\$183.76
12007 Repair Of Wound (Over 30.0 Centimeters) Of The Scalp, Neck, Underarms, Genitals, Trunk, Arms And/Or Legs	\$242.50
12011 Repair Of Wound (2.5 Centimeters Or Less) Of The Face, Ears, Eyelids, Nose, Lips, And/Or Mucous Membranes	\$116.75
12013 Repair Of Wound (2.6 To 5.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Lips, And/Or Mucous Membranes	\$121.12
12014 Repair Of Wound (5.1 To 7.5 Centimeters) Of The Face, Ears, Eyelids, Nose, Lips, And/Or Mucous Membranes	\$128.91
12015 Repair Of Wound (7.6 To 12.5 Centimeters) Of The Face, Ears, Eyelids, Nose, Lips, And/Or Mucous Membranes	\$156.89
12016 Repair Of Wound (12.6 To 20.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Lips, And/Or Mucous Membranes	\$212.11
12017 Repair Of Wound (20.1 To 30.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Lips, And/Or Mucous Membranes	\$148.22
12018 Repair Of Wound (Over 30.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Lips, And/Or Mucous Membranes	\$150.99
12020 Simple Closure Of Surface Wound Reopening	\$208.94
12021 Repair Of Separation Of Wound Closure With Insertion Of Packing	\$121.78
12031 Repair Of Wound (2.5 Centimeters Or Less) Of The Scalp, Underarms, Trunk, Arms, And/Or Legs	\$221.32
12032 Repair Of Wound (2.6 To 7.5 Centimeters) Of The Scalp, Underarms, Trunk, Arms, And/Or Legs	\$293.85
12034 Repair Of Wound (7.6 To 12.5 Centimeters) Of The Scalp, Underarms, Trunk, Arms, And/Or Legs	\$288.52
12035 Repair Of Wound (12.6 To 20.0 Centimeters) Of The Scalp, Underarms, Trunk, Arms, And/Or Legs	\$269.37
12036 Repair Of Wound (20.1 To 30.0 Centimeters) Of The Scalp, Underarms, Trunk, Arms, And/Or Legs	\$297.59
12037 Repair Of Wound (Over 30.0 Centimeters) Of The Scalp, Underarms, Trunk, Arms, And/Or Legs	\$331.45
12041 Repair Of Wound (2.5 Centimeters Or Less) Of Neck, Hands, Feet, And/Or Genitals	\$223.55
12042 Repair Of Wound (2.6 To 7.5 Centimeters) Of Neck, Hands, Feet, And/Or Genitals	\$278.59
12044 Repair Of Wound (7.6 To 12.5 Centimeters) Of Neck, Hands, Feet, And/Or Genitals	\$266.43
12045 Repair Of Wound (12.6 To 20.0 Centimeters) Of Neck, Hands, Feet, And/Or Genitals	\$282.41
12046 Repair Of Wound (20.1 To 30.0 Centimeters) Of Neck, Hands, Feet, And/Or Genitals	\$437.45
12047 Repair Of Wound (Over 30.0 Centimeters) Of Neck, Hands, Feet, And/Or Genitals	\$513.57
12051 Repair Of Wound (2.5 Centimeters Or Less) Of Face, Ears, Eyelids, Nose, Lips, And/Or Mouth	\$259.91
12052 Repair Of Wound (2.6 To 5.0 Centimeters) Of Face, Ears, Eyelids, Nose, Lips, And/Or Mouth	\$287.11
12053 Repair Of Wound (5.1 To 7.5 Centimeters) Of Face, Ears, Eyelids, Nose, Lips, And/Or Mouth	\$255.14
12054 Repair Of Wound (7.6 To 12.5 Centimeters) Of Face, Ears, Eyelids, Nose, Lips, And/Or Mouth	\$268.46
12055 Repair Of Wound (12.6 To 20.0 Centimeters) Of Face, Ears, Eyelids, Nose, Lips, And/Or Mouth	\$350.00
12056 Repair Of Wound (20.1 To 30.0 Centimeters) Of Face, Ears, Eyelids, Nose, Lips, And/Or Mouth	\$547.55
12057 Repair Of Wound (Over 30.0 Centimeters) Of Face, Ears, Eyelids, Nose, Lips, And/Or Mouth	\$576.50
13100 Repair, Complex, Trunk; 1.0 Cm To 2.5 Cm	\$305.74
13101 Repair, Complex, Trunk; 2.5 Cm To 7.5 Cm	\$383.95
13102 Repair, Complex, Trunk; Each Additional 5 Cm Or Less (List Separately In Addition To Code For Primary Procedure) 13120 Repair Of Wound (1.1 To 2.5 Centimeters) Of Scalp, Arms, And/Or Legs	\$109.16
13121 Repair Of Wound (1.1 10 2.5 Centimeters) Of Scalp, Arms, And/Or Legs	\$249.06
13122 Repair Of Wound 0f Scalp, Arms, And/Or Legs	\$425.40 \$132.60
13131 Repair Of Would Of Scalp, Affic, Androi Legs 13131 Repair Of Would (1.1 To 2.5 Centimeters) Of Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands, And/Or Feet	\$353.42
13132 Repair Of Wound (2.6 To 7.5 Centimeters) Of Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands, And/Or Feet	\$498.92
13133 Repair Of Wound Of Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands, And/Or Feet	\$176.72
13151 Repair Of Wound (1.1 To 2.5 Centimeters) Of Eyelids, Nose, Ears, And/Or Lips	\$405.17
13152 Repair Of Wound (2.6 To 7.5 Centimeters) Of Eyelids, Nose, Ears, And/Or Lips	\$555.44
13153 Repair Of Wound Of Eyelids, Nose, Ears, And/Or Lips	\$191.42
13160 Extensive Or Complicated Repair Of Surface Wound Reopening	\$817.29
14000 Adjacent Tissue Transfer Or Rearrangement, Trunk; Defect Up To 10 Sq Cm	\$559.96
14001 Adjacent Tissue Transfer Or Rearrangement, Trunk; Defect 10 Sq Cm To 30 Sq Cm	\$750.36
14020 Tissue Transfer Repair Of Wound (10 Sq Centimeters Or Less) Of The Scalp, Arms, And/Or Legs	\$481.10
14021 Tissue Transfer Repair Of Wound (10.1 To 30.0 Sq Centimeters) Of The Scalp, Arms, And/Or Legs	\$658.77
Tissue Transfer Repair Of Wound (10 Sq Centimeters Or Less) Of The Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands,	φοσοιτί
14040 And/Or Feet	\$579.38
Tissue Transfer Repair Of Wound (10.1 To 30.0 Sq Centimeters) Of The Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands,	
14041 And/Or Feet	\$782.51
14060 Tissue Transfer Repair Of Wound (10 Sq Centimeters Or Less) Of Eyelids, Nose, Ears, And/Or Lips	\$664.91
14061 Tissue Transfer Repair Of Wound (10.1 To 30.0 Sq Centimeters) Of Eyelids, Nose, Ears, And/Or Lips	\$917.87
14301 Adjacent Tissue Transfer Or Rearrangement, Any Area; Defect 30.1 Sq Cm To 60.0 Sq Cm	\$1,121.11
14302 Tissue Transfer Repair Of Wound (30.0 Sq Centimeters)	\$214.95
14350 Filleted Finger Or Toe Flap, Including Preparation Of Recipient Site	\$643.50
15002 Preparation Of Graft Site At Trunk, Arms, Or Legs (First 100 Sq Cm Or 1% Body Area Infants And Children)	\$335.69
15003 Preparation Of Graft Site At Trunk, Arms, Or Legs	\$71.67
Preparation Of Graft Site Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes	_
15004 (First 100 Sq Cm Or 1% Body Area Of Infants And Children)	\$273.05
45005 Desperation Of Craft Site Of Econ Scale Fuelide Mouth Neels For Sur Paris Cartists Hands For Aut Cartist Hands For A	*
15005 Preparation Of Graft Site Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes	\$123.17
15040 Harvest Of Skin For Tissue Cultured Skin Autograft, 100 Sq Cm Or Less	\$251.00
15050 Skin Graft To Tip Of Finger Or Toe, 2.0 Cm Or Less	\$558.59
15100 Partial Thickness Skin Graft At Trunk, Arms, Or Legs (First 100 Sq Cm Or Less, Or 1% Body Are Of Infants And Children)	\$895.68
15101 Partial Thickness Skin Graft At Trunk, Arms, Or Legs (Additional 100 Sq Cm, Or 1% Body Are Of Infants And Children)	\$197.00
15110 Skin Graft At Trunk, Arms, Or Legs (First 100 Sq Cm Or Less, Or 1% Body Area Of Infants And Children), Outer Layer	\$863.53
15111 Skin Graft At Trunk, Arms, Or Legs (Additional 100 Sq Cm, Or 1% Body Are Of Infants And Children), Outer Layer	\$112.00
Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes (First 100 Sq Cm	Ф 7 40.00
15115 Or Less, Or 1% Body Area Of Infants And Children) Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes (Additional 100 Sq	\$742.93
Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Of Multiple Fingers Of Toes (Additional 100 Sq 15116 Cm Of Less, Or 1% Body Area Of Infants And Children), Outer Layer	\$148.55
10110 pm. 0. 2000, 0. 170 Dody 7100 Of Illianto 7110 Officially, Outor Edyor	ψ140.00

Code	Description Control of the Control o	Fee
15120	Partial Thickness Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes (First 100 Sq Cm Or Less, Or 1% Body Area Of Infants And Children)	\$675.90
10120	Partial Thickness Skin Graft Of Face, Scalp, Evelids, Mouth, Neck, Ears, Eve Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes	ψ010.50
15121	(Additional 100 Sq Cm Or Less, Or 1% Body Area Of Infants And Children)	\$220.88
15130	Skin Graft At Trunk, Arms, Or Legs (First 100 Sq Cm Or Less, Or 1% Body Area Of Infants And Children), Deep Layer	\$674.95
15131	Skin Graft At Trunk, Arms, Or Legs (Additional 100 Sq Cm, Or 1% Body Area Of Infants And Children), Deep Layer	\$88.10
	Deep Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes (First 100 Sq	
15135	Cm Or Less, Or 1% Body Area Of Infants And Children)	\$817.09
15126	Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes (Additional 100 Sq Cm, Or 1% Body Area Of Infants And Children), Deep Layer	\$87.11
	Tissue Cultured Skin Graft At Trunk, Arms, Or Legs (First 25 Sq Centimeters Or Less)	\$644.00
	Tissue Cultured Skin Graft At Trunk, Arms, Or Legs (Additional 1 Sq Cm To 75 Sq Cm)	\$104.87
10101		ψ.σσ.
15152	Tissue Cultured Skin Graft At Trunk, Arms, Or Legs (Additional 100 Sq Cm, Or Each Additional 1% Of Body Area Of Infants And Children)	\$132.23
	Tissue Cultured Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes	
15155	(First 25 Sq Centimeters Or Less)	\$733.80
45450	Tissue Cultured Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes	£440.70
15156	(Additional 1 Sq Cm To 75 Sq Cm) Tissue Cultured Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes	\$140.72
15157	(Additional 100 Sq Cm, Or Each Additional 1% Of Body Area Of Infants And Children)	\$156.45
	Full Thickness Skin Graft To Trunk, 20.0 Sq Cm Or Less	\$778.51
	Full Thickness Skin Graft To Trunk, Each Additional 20.0 Sq Cm	\$132.34
	Full Thickness Skin Graft To Scalp, Arms, Or Legs, 20.0 Sq Cm Or Less	\$680.46
	Full Thickness Skin Graft To Scalp, Arms, Or Legs, Each Additional 20.0 Sq Cm	\$137.70
15240	Full Thickness Skin Graft To Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands, Or Feet, 20.0 Sq Cm Or Less	\$936.90
	Full Thickness Skin Graft To Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands, Or Feet, Each Additional 20.0 Sq Cm	\$163.10
	Full Thickness Skin Graft To Nose, Ears, Eyelids, Or Lips, 20.0 Sq Cm Or Less	\$715.90
	Full Thickness Skin Graft To Nose, Ears, Eyelids, Or Lips, Each Additional 20.0 Sq Cm	\$193.85
	Application Of Skin Substitute (Wound Surface Up To 100 Sq Cm) To Trunk, Arms, Or Legs (First 25 Sq Cm Or Less)	\$165.85
15272	Application Of Skin Substitute (Wound Surface Up To 100 Sq Cm) To Trunk, Arms, Or Legs	\$25.59
15273	Application Of Skin Substitute (Wound Surface Greater Or Equal To 100 Sq Cm) To Trunk, Arms, Or Legs (First 100 Sq Cm Or 1% Body Area Of Infants And Children)	\$329.22
	Application Of Skin Substitute (Wound Surface Greater Or Equal To 100 Sq Cm) To Trunk, Arms, Or Legs	\$75.21
10271	Application Of Skin Substitute (Wound Surface Up To 100 Sq Cm) To Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands,	ψ/ 0.2 1
15275	Feet, And/Or Multiple Fingers Or Toes (First 25 Sq Cm Or Less)	\$167.85
	Application Of Skin Substitute (Wound Surface Up To 100 Sq Cm) To Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands,	
15276	Feet, And/Or Multiple Fingers Or Toes"	\$33.35
	Application Of Skin Substitute (Wound Surface Great Than Or Equal To 100 Sq Cm) To Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region,	
15277	Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes (First 100 Sq Cm Or 1% Body Area Of Infants And Children)	\$361.50
15278	Application Of Skin Substitute (Wound Surface Great Than Or Equal To 100 Sq Cm) To Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes	\$90.26
	Formation Of Direct Or Tubed Pedicle, With Or Without Transfer; Trunk	\$844.17
	Creation Of Flap Graft To Scalp, Arms, Or Legs	\$811.47
	Creation Of Flap Graft To Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands, Or Feet	\$818.74
15576	Creation Of Flap Graft To Eyelids, Nose, Ears, Lips, Or Mouth	\$735.00
15600	Delay Of Flap Or Sectioning Of Flap (Division And Inset); At Trunk	\$321.74
	Transfer Of Skin Flap To Scalp, Arms, Or Legs	\$348.15
	Transfer Of Skin Flap To Forehead, Cheeks, Chin, Neck, Underarms, Genitals, Hands, Or Feet	\$421.81
	Transfer Of Skin Flap To Eyelids, Nose, Ears, Or Lips	\$462.25
	Transfer, Intermediate, Of Any Pedicle Flap (Eg, Abdomen To Wrist, "Walking" Tube), Any Location	\$480.51
	Creation Of Flap Graft To Midface	\$1,361.09
	Creation Of Flap Graft To Nose, Forehead, Temple, Or Scalp Creation Of Flap Graft To Head And/Or Neck	\$1,162.98 \$1,085.43
	Muscle, Myocutaneous, Or Fasciocutaneous Flap Trunk	\$1,515.80
	Muscle, Myocutaneous, Or Fasciocutaneous Flap Upper Extremity	\$1,228.71
	Muscle, Myocutaneous, Or Fasciocutaneous Flap Lower Extremity	\$1,283.87
	Flap; Island Pedicle Requiring Identification And Dissection Of An Anatomically Named Axial Vessel	\$1,004.93
	Flap; Neurovascular Pedicle	\$847.76
15756	Creation Of Muscle Or Muscle And Skin Graft With Reattachment Of Small Blood Vessels	\$2,313.12
	Creation Of Skin Graft With Reattachment Of Small Blood Vessels	\$2,302.86
	Creation Of Fibrous Muscle Covering (Fascia) Graft With Reattachment Of Small Blood Vessels	\$2,072.42
	Graft; Composite (Full Thickness Of External Ear Or Nasal Ala), Including Primary Closure, Donor Area	\$787.53
	Grafting Of Patient Soft Tissue, Harvested By Direct Excision	\$489.78
	Creation Of Skin, Fat And Muscle Graft Crefting Of Patient Fat Harvested By Lineaustics To Trunk Breasts, Scale Arms, And/Or Leas: F0 Cubic Continuous Or Leas	\$600.57
15//1	Grafting Of Patient Fat, Harvested By Liposuction To Trunk, Breasts, Scalp, Arms, And/Or Legs; 50 Cubic Centimeters Or Less	\$591.08
15772	Grafting Of Patient Fat, Harvested By Liposuction To Trunk, Breasts, Scalp, Arms, And/Or Legs; Additional 50 Cubic Centimeters Or Less	\$184.45
.0.72	Grafting Of Patient Fat, Harvested By Liposuction To Face, Evelids, Mouth, Neck, Ears, Orbits, Genitalia, Hands, And/Or Feet; 25 Cc Or Less	ψ10-740
15773	Injectate	\$556.66
	Grafting Of Patient Fat, Harvested By Liposuction To Face, Eyelids, Mouth, Neck, Ears, Orbits, Genitalia, Hands, And/Or Feet; Each Additional	
15774	25 Cc Or Less Injectate	\$170.57
	Implantation Of Biologic Implant (Eg, Acellular Dermal Matrix) For Soft Tissue Reinforcement (Eg, Breast, Trunk) (List Separately In Addition To	
	Code For Primary Procedure)	\$213.29
	Implantation Of Artificial Material For Delayed Closure Of Defects Due To Soft Tissue Infection Or Trauma	\$318.65
	Scraping Of Skin Of The Entire Face	\$797.13
16/21	Repair Of Detached Retina, 1 Or More Sessions	\$508.34

	Description College Office Office The Tree	Fee
	Scraping Of Skin Other Than The Face Scraping Of Skin Any Site (Superficial)	\$459.01 \$423.03
	Abrasion; Single Lesion (Eg, Keratosis, Scar)	\$220.84
	Abrasion; Each Additional Four Lesions Or Less (List Separately In Addition To Code For Primary Procedure)	\$29.66
	Chemical Peel Of Skin Of Face, Outer Layer	\$376.18
	Chemical Peel Of Skin Of Face, Deep Layer	\$499.84
15792	Chemical Peel Of Skin Other Than Face, Outer Layer	\$319.60
15793	Chemical Peel, Nonfacial; Dermal	\$447.49
	Cervicoplasty	\$730.36
	Blepharoplasty, Lower Eyelid;	\$545.59
	Blepharoplasty, Lower Eyelid; With Extensive Herniated Fat Pad	\$583.29
	Blepharoplasty, Upper Eyelid; Blepharoplasty, Upper Eyelid; With Eyesseive Skip Weighting Down Lid	\$435.51
	Blepharoplasty, Upper Eyelid; With Excessive Skin Weighting Down Lid Incision, Stretching, And Suture Of Forehead Skin	\$591.34
	Incision, Stretching, And Suture Of Poteneau Skin	\$710.55 Price By Report
	Incision, Stretching, And Suture Of Skin Between Eyebrows	\$568.43
	Incision, Stretching, And Suture Of Skin	\$2,093.08
	Removal Of Excessive Skin At Cheek, Chin, Or Neck	Price By Report
	Excision, Excessive Skin And Subcutaneous Tissue (Includes Lipectomy); Abdomen, Infraumbilical Panniculectomy	\$925.69
	Excision, Excessive Skin And Subcutaneous Tissue (Including Lipectomy) Thigh	\$816.81
15833	Excision, Excessive Skin And Subcutaneous Tissue (Including Lipectorny) Leg	\$800.66
15834	Excision, Excessive Skin And Subcutaneous Tissue (Including Lipectomy) Hip	\$815.29
15835	Excision, Excessive Skin And Subcutaneous Tissue (Including Lipectomy) Buttock	\$848.06
	Excision, Excessive Skin And Subcutaneous Tissue (Including Lipectomy) Arm	\$728.40
	Excision, Excessive Skin And Subcutaneous Tissue (Including Lipectomy) Forearm Or Hand	\$803.20
	Excision, Excessive Skin And Subcutaneous Tissue (Including Lipectomy) Submental Fat Pad	\$594.88
	Excision, Excessive Skin And Subcutaneous Tissue (Including Lipectomy) Other Area	\$604.82
	Fibrous Tissue Graft To Relieve Or Reactivate Facial Paralysis	\$931.99
	Muscle Graft To Relieve Or Reactivate Facial Paralysis Microsurgical Muscle Graft To Relieve Or Reactivate Facial Paralysis	\$1,617.54
	Regional Muscle Transfer To Relieve Or Reactivate Facial Paralysis	\$2,445.61
	Regional Muscle Translet To Relieve of Reactivate Pacial Paralysis Removal Of Sutures Under Anesthesia (Other Than Local), Other Surgeon	\$968.96 \$75.34
	Dressing Change (For Other Than Burns) Under Anesthesia (Other Than Local)	\$46.11
	Removal Of Sutures Or Staples	\$10.18
	Removal Of Sutures And Staples	\$14.25
	Intravenous Injection Of Agent (Eg, Fluorescein) To Test Vascular Flow In Flap Or Graft	\$105.79
	Suction Assisted Lipectomy; Head And Neck	Price By Report
15877	Suction Assisted Lipectomy; Trunk	Price By Report
15878	Suction Assisted Lipectomy; Upper Extremity	Price By Report
15879	Suction Assisted Lipectomy; Lower Extremity	Price By Report
	Excision, Coccygeal Pressure Ulcer, With Coccygectomy; With Primary Suture	\$441.43
	Excision, Coccygeal Pressure Ulcer, With Coccygectomy; With Flap Closure	\$731.55
	Excision, Sacral Pressure Ulcer, With Primary Suture;	\$470.35
	Excision, Sacral Pressure Ulcer, With Primary Suture; With Ostectomy	\$746.11
	Excision, Sacral Pressure Ulcer, With Skin Flap Closure; Excision, Sacral Pressure Ulcer, With Skin Flap Closure; With Ostectomy	
	Excision, Sacrai Pressure Older, With Skin Plap Closure, With Ostectomy	\$809.07
	Expision Special Procesure I llear. In Propagation For Muscale Or Muscautopoous Flan Or Skin Graft Clasure:	\$1,057.05
	Excision, Sacral Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy	\$1,057.05 \$928.43
15937	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy	\$1,057.05 \$928.43 \$1,057.19
15937 15940	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture;	\$1,057.05 \$928.43 \$1,057.19 \$501.93
15937 15940 15941	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy	\$1,057.05 \$928.43 \$1,057.19
15937 15940 15941 15944	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy)	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11
15937 15940 15941 15944 15945	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure;	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09
15937 15940 15941 15944 15945 15946 15950	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture;	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31
15937 15940 15941 15944 15945 15946 15950 15951	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37
15937 15940 15941 15944 15945 15946 15950 15951 15952	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Flimary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure;	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37
15937 15940 15941 15944 15945 15946 15950 15951 15952 15953	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$838.53
15937 15940 15941 15944 15945 15946 15950 15951 15952 15953 15956	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$838.53 \$924.32
15937 15940 15941 15944 15945 15946 15950 15951 15952 15953 15956 15958	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$838.53 \$924.32 \$1,065.98
15937 15940 15941 15944 15945 15946 15950 15951 15952 15953 15958 15958	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$838.53 \$924.32 \$1,065.98 \$1,087.61 Price By Report
15937 15940 15941 15944 15945 15946 15950 15951 15953 15953 15958 15999 16000	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$338.53 \$924.32 \$1,065.98 \$1,087.61 Price By Report
15937 15940 15941 15944 15945 15946 15950 15951 15953 15953 15958 15999 16000	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface)	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$838.53 \$924.32 \$1,065.98 \$1,087.61 Price By Report
15937 15940 15941 15944 15945 15946 15950 15951 15952 15953 15956 15958 15999 16000	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$838.53 \$924.32 \$1,065.98 \$1,087.61 Price By Report
15937 15940 15941 15944 15945 15946 15950 15951 15952 15953 15956 15958 15999 16000	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface)	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$338.53 \$924.32 \$1,065.98 \$1,087.61 Price By Report
15937 15940 15941 15944 15945 15946 15951 15951 15952 15953 15956 15958 15999 16000 16020	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area)	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$838.53 \$924.32 \$1,065.98 \$1,087.61 Price By Report
15937 15940 15941 15944 15945 15950 15951 15952 15953 15956 15958 15999 16000 16020	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10%	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$838.53 \$924.32 \$1,065.98 \$1,087.61 Price By Report \$66.84 \$92.51
15937 15940 15941 15944 15945 15946 15950 15951 15952 15953 15956 15958 15999 16000 16020 16025	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Irochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocut	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$838.53 \$924.32 \$1,065.98 \$1,087.61 Price By Report \$66.84 \$92.51
15937 15940 15941 15944 15945 15946 15950 15951 15952 15953 15956 15958 15999 16000 16020 16025	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Irochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Frimary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Initial Incision Of Burn Tissue Additional Incision Of Burn Tissue Destruction Of Skin Growth	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$838.53 \$924.32 \$1,065.98 \$1,087.61 Price By Report \$66.84 \$92.51
15937 15940 15941 15944 15945 15946 15950 15951 15952 15953 15956 15958 15999 16000 16020 16020	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$838.53 \$924.32 \$1,065.98 \$1,087.61 Price By Report \$66.84 \$92.51 \$108.01 \$134.67 \$172.81 \$70.20
15937 15940 15941 15944 15945 15946 15950 15951 15952 15953 15956 15958 15999 16000 16020 16035 16036 17000	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Initial Incision Of Burn Tissue Additional Incision Of Burn Tissue Destruction By Any Method, Including Laser, With Or Without Surgical Curettement, All Benign Or Premalignant Lesions (Eg, Actinic Keratoses) Other Than Skin Tags Or Cutaneous Vascular Proliferative Lesions, Including Local	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$838.53 \$924.32 \$1,065.98 \$1,087.61 Price By Report \$66.84 \$92.51 \$108.01 \$134.67 \$172.81 \$70.20 \$73.46
15937 15940 15941 15944 15945 15950 15951 15952 15953 15956 15958 15959 16000 16020 16025 16035 16036 17000	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$838.53 \$924.32 \$1,065.98 \$1,087.61 Price By Report \$66.84 \$92.51 \$108.01 \$134.67 \$172.81 \$70.20 \$73.46
15937 15940 15941 15944 15945 15950 15951 15952 15953 15956 15958 15959 16000 16020 16025 16035 16036 17000 17003	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Initial Incision Of Burn Tissue Additional Incision Of Burn Tissue Destruction Of Skin Growth Destruction Of Skin Growth Destruction Of Skin Growth Destruction Of Cutaneous Vascular Proliferative Lesions, Including Local Anesthesia; 2 - 14 Each. Destruction Of Cutaneous Vascular Proliferative Lesions, (Eg, Laser Technique); Less Than 10 Sq Cm	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$838.53 \$924.32 \$1,065.98 \$1,087.61 Price By Report \$66.84 \$92.51 \$108.01 \$134.67 \$172.81 \$70.20 \$73.46
15937 15940 15941 15944 15945 15950 15951 15952 15953 15956 15958 15958 16000 16020 16025 16035 17000 17000 17003	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Initial Incision Of Burn Tissue Additional Incision Of Burn Tissue Destruction Of Skin Growth Destruction Of Skin Growth Destruction Of Skin Growth Destruction Of Tso More Premalignant Skin Growths Destruction Of To More Premalignant Skin Growths Destruction Of Cutaneous Vascular Proliferative Le	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$838.53 \$924.32 \$1,065.98 \$1,087.61 Price By Report \$66.84 \$92.51 \$108.01 \$134.67 \$172.81 \$70.20 \$73.46
15937 15940 15941 15944 15945 15950 15951 15952 15953 15956 15958 15958 16000 16020 16025 16035 17000 17000 17003	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total B	\$1,057.05 \$928.43 \$1,057.19 \$501.93 \$946.11 \$856.09 \$933.59 \$1,563.31 \$429.28 \$826.37 \$838.53 \$924.32 \$1,065.98 \$1,087.61 Price By Report \$66.84 \$92.51 \$108.01 \$134.67 \$172.81 \$70.20 \$73.46
15937 15940 15941 15944 15945 15946 15950 15951 15952 15953 15956 15958 15999 16000 16020 16025 16035 17000 17003 17004 17106 17107	Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Primary Suture; Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy) Excision, Ischial Pressure Ulcer, With Skin Flap Closure; Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Initial Incision Of Burn Tissue Additional Incision Of Burn Tissue Destruction Of Skin Growth Destruction Of Skin Growth Destruction Of Skin Growth Destruction Of Tso More Premalignant Skin Growths Destruction Of To More Premalignant Skin Growths Destruction Of Cutaneous Vascular Proliferative Le	\$1,057.05 \$928.43 \$1,057.15 \$501.93 \$946.11 \$856.05 \$933.55 \$1,563.31 \$429.25 \$826.37 \$838.53 \$924.32 \$1,065.96 \$1,087.61 Price By Repor \$66.84 \$92.51 \$108.01 \$134.67 \$172.81 \$70.20 \$73.46

Code	Description	Fee
	Destruction Of 15 Or More Non-Cancerous Skin Growths	\$117.55
17250	Application Of Chemical Agent To Excessive Wound Tissue	\$72.80
17260	Destruction Of Cancer Skin Growth Of Trunk, Arms, Or Legs, 0.5 Cm Or Less	\$92.86
	Destruction Of Cancer Skin Growth Of Trunk, Arms, Or Legs, 0.6-1.0 Cm	\$133.08
	Destruction Of Cancer Skin Growth Of Trunk, Arms, Or Legs, 1.1-2.0 Cm	\$167.45
	Destruction Of Cancer Skin Growth Of Trunk, Arms, Or Legs, 2.1-3.0 Cm	\$152.44
	Destruction Of Cancer Skin Growth Of Trunk, Arms, Or Legs, 3.1-4.0 Cm	\$196.20
	Destruction Of Cancer Skin Growth Of Trunk, Arms, Or Legs, More Than 4.0 Cm	\$222.81
	Destruction Of Cancer Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals, 0.5 Cm Or Less	\$141.33
	Destruction Of Cancer Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals, 0.6-1.0 Cm	\$171.80
	Destruction Of Cancer Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals, 1.1-2.0 Cm Destruction Of Cancer Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals, 2.1-3.0 Cm	\$179.08 \$197.95
	Destruction Of Cancer Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals, 3.1-4.0 Cm	\$231.11
	Destruction Of Cancer Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals, More Than 4.0 Cm	\$267.98
	Destruction Of Cancer Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth, 0.5 Cm Or Less	\$147.82
	Destruction Of Cancer Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth, 0.6-1.0 Cm	\$189.40
	Destruction Of Cancer Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth, 1.1-2.0 Cm	\$216.31
	Destruction Of Cancer Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth, 2.1-3.0 Cm	\$229.14
	Destruction Of Cancer Skin Growth Of Face, Ears, Eyelids, Nose, Lips, or Mouth, 3.1-4.0 Cm	\$260.35
	Destruction Of Cancer Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth, More Than 4.0 Cm	\$332.57
	Removal And Microscopic Examination Of Growth Of The Head, Neck, Hands, Feet, Or Genitals (First Stage, Up To 5 Tissue Blocks)	\$488.09
	Removal And Microscopic Examination Of Growth Of The Head, Neck, Hands, Feet, Or Genitals	\$285.41
	Removal And Microscopic Examination Of Growth Of The Trunk, Arms, Or Legs (First Stage, Up To 5 Tissue Blocks)	\$627.95
	Removal And Microscopic Examination Of Growth Of The Trunk, Arms, Or Legs (Additional Stage, Up To 5 Tissue Blocks)	\$372.83
	Removal And Microscopic Examination Of Growth Of The Trunk, Arms, Or Legs (Additional Stage, After First 5 Tissue Blocks)	\$72.31
	Cold Treatment Of Acne Chemical Treatment Of Acne	\$52.05 \$114.94
	Skin, Mucus Membrane And Beneath The Skin Procedure	\$114.84
	Aspiration Of Cyst Of Breast, First Cyst	Price By Report \$109.55
	Aspiration Of Cyst Of Breast, First Cyst Aspiration Of Cyst Of Breast, Each Additional Cyst	\$24.77
	Drainage Of Abscess Of Breast	\$325.89
	Injection For X-Ray Imaging Of Breast Duct	\$116.59
	Biopsy Of Breast Accessed Through The Skin With Stereotactic Guidance, First Lesion	\$576.09
	Biopsy Of Breast Accessed Through The Skin With Stereotactic Guidance, Additional Lesion	\$432.73
	Biopsy of Breast Accessed Through The Skin With Ultrasound Guidance, First Lesion	\$573.62
	Biopsy Of Breast Accessed Through The Skin With Ultrasound Guidance, Additional Lesion	\$428.72
	Biopsy Of Breast Accessed Through The Skin With Mri Guidance, First Lesion	\$874.24
	Biopsy Of Breast Accessed Through The Skin With Mri Guidance, Additional Lesion	\$605.93
19100	Biopsy Of Breast; Percutaneous, Needle Core, Not Using Imaging Guidance (Separate Procedure)	\$106.66
19101	Biopsy Of Breast, Open Procedure	\$310.58
19105	Ablation, Cryosurgical, Of Fibroadenoma, Including Ultrasound Guidance, Each Fibroadenoma	\$2,375.09
19110	Nipple Exploration, With Or Without Excision Of A Solitary Lactiferous Duct Or A Papilloma Lactiferous Duct	\$335.79
19112	Excision Of Lactiferous Duct Fistula	\$436.57
19120	Removal Of 1 Or More Breast Growth, Open Procedure	\$468.95
19125	Removal Of Breast Growth, Open Procedure	\$385.06
	Removal Of Growth Of Chest Wall And Ribs, Open Procedure	\$140.41
	Placement Of Breast Localization Devices Accessed Through The Skin With Mammographic Guidance, First Lesion	\$207.68
	Placement Of Breast Localization Devices Accessed Through The Skin With Mammographic Guidance, Additional Lesion	\$165.19
	Placement Of Breast Localization Devices Accessed Through The Skin With Stereotactic Guidance, First Lesion	\$251.46
	Placement Of Breast Localization Devices Accessed Through The Skin With Stereotactic Guidance, Additional Lesion	\$188.96
	Placement Of Breast Localization Devices Accessed Through The Skin With Ultrasound Guidance, First Lesion	\$405.94
	Placement Of Breast Localization Devices Accessed Through The Skin With Ultrasound Guidance, Additional Lesion	\$307.78
	Placement Of Breast Localization Devices Accessed Through The Skin With Mri Guidance, First Lesion Placement Of Breast Localization Devices Accessed Through The Skin With Mri Guidance, Additional Lesion	\$644.67 \$502.26
19288	Preparation Of Tumor Cavity And Placement Of Radiation Therapy Applicator Into Breast For Radiation Therapy Concurrent With Partial Breast	φ502.26
10204	Removal	\$143.90
10204	Placement Of Radiotherapy Afterloading Expandable Catheter (Single Or Multichannel) Into The Breast For Interstitial Radioelement Application	ψ143.30
19296	Following Partial Mastectomy, Includes Imaging Guidance; On Date Separate From Partial Mastectomy	\$3,815.40
. 3200	U	\$5,5.5.10
	Placement Of Radiotherapy Afterloading Expandable Catheter (Single Or Multichannel) Into The Breast For Interstitial Radioelement Application	
19297	Following Partial Mastectomy, Includes Imaging Guidance; Concurrent With Partial Mastectomy (List Sep	\$82.27
	Insertion Of Catheters Into Breast For Radiation Therapy With Or After Breast Removal Using Imaging Guidance	\$857.00
19300	Mastectomy For Gynecomastia	\$511.50
	Mastectomy, Partial (Eg, Lumpectomy, Tylectomy, Quadrantectomy, Segmentectomy);	\$434.26
19302	Mastectomy, Partial (Eg, Lumpectomy, Tylectomy, Quadrantectomy, Segmentectomy); With Axillary Lymphadenectomy	\$902.51
	Mastectomy, Simple, Complete	\$627.71
	Removal Of Breast, Lymph Nodes, And Muscle	\$1,029.24
19306	Removal Of Breast, Skin, Lymph Nodes, And Chest Muscles	\$1,098.04
	Mastectomy, Modified Radical, Including Axillary Lymph Nodes, With Or Without Pectoralis Minor Muscle, But Excluding Pectoralis Major	
	Muscle	\$1,176.25
	Repair For Sagging Of The Breast	\$799.64
	Breast Reduction	\$1,150.58
	Insertion Of Breast Implant	\$562.72
	Removal Of Intact Breast Implant	\$480.11
	Removal Of Ruptured Breast Implant And Implant Material	\$589.73
	Immediate Insertion Of Breast Implant On Same Day As Mastectomy	\$699.32

Code Description	
	Fee
19342 Delayed Insertion Of Breast Implant After Mastectomy 19350 Nipple/Areola Reconstruction	\$772.26 \$770.25
19355 Correction Of Inverted Nipples	\$523.51
19357 Reconstruction Of Breast Using Tissue Expander	\$1,237.96
19361 Reconstruction Of Breast With Back Muscle Flap	\$1,632.50
19364 Reconstruction Of Breast With Free Flap	\$2,463.54
19367 Reconstruction Of Breast With Abdominal Muscle Flap	\$1,606.82
19368 Reconstruction Of Breast With Single-Based Abdominal Muscle Flap	\$1,967.24
19369 Reconstruction Of Breast With Double-Based Abdominal Muscle Flap	\$1,828.47
19370 Surgical Change To Tissue Capsule Surrounding Breast Implant	\$589.85
19371 Removal Of Entire Tissue Capsule Surrounding Breast Implant	\$719.62
19380 Surgical Change To Reconstructed Breast	\$719.31
19396 Preparation Of Moulage For Custom Breast Implant	\$262.57
19499 Unlisted Procedure, Breast	Price By Report
20100 Exploration Of Penetrating Wound (Separate Procedure); Neck	\$623.06
20101 Exploration Of Penetrating Wound (Separate Procedure); Chest	\$420.12
20102 Exploration Of Penetrating Wound Of Abdomen, Flank, Or Back 20103 Exploration Of Penetrating Wound (Separate Procedure); Extremity	\$465.52
20103 Exploration of Penetrating Wound (Separate Procedure), Extremity 20150 Excision Of Epiphyseal Bar, With Or Without Autogenous Soft Tissue Graft Obtained Through Same Fascial Incision	\$564.04 \$907.88
20100 Excision of Epiphysear Bar, With Or Without Autogenous Soft Tissue Graft Obtained Through Same Pascial Incision 20200 Biopsy Of Muscle	
20205 Biopsy, Muscle; Deep	\$153.76 \$210.92
20206 Needle Biopsy Of Muscle	\$164.07
20200 Biopsy Of Bone Using Needle Or Trocar	\$170.00
20225 Deep Biopsy Of Bone Using Needle Or Trocar	\$280.59
20240 Biopsy Of Bone, Open Procedure, Superficial	\$143.44
20245 Biopsy Of Bone, Open Procedure, Deep	\$304.06
20250 Biopsy Of Middle Spine Bone	\$385.22
20251 Biopsy Of Upper Or Lower Spine Bone	\$377.42
20500 Injection Of Sinus Tract; Therapeutic (Separate Procedure)	\$114.84
20501 Injection Of Sinus Tract; Diagnostic (Sinogram)	\$104.75
20520 Removal Of Foreign Body In Muscle; Simple	\$151.65
20525 Removal Of Foreign Body In Muscle; Deep Or Complicated	\$325.96
20526 Injection, Therapeutic (Eg, Local Anesthetic, Corticosteroid), Carpal Tunnel	\$86.74
20527 Injection Of Enzyme In Palm Tissue	\$80.31
20550 Injections Of Tendon Sheath, Ligament, Or Muscle Membrane	\$59.40
20551 Injection(S); Single Tendon Origin/Insertion	\$60.36
20552 Injection(S); Single Or Multiple Trigger Point(S), One Or Two Muscle(S)	\$55.64
20553 Injections Of Trigger Points In 3 Or More Muscles	\$64.12
Placement Of Needles Or Catheters Into Muscle And/Or Soft Tissue For Subsequent Interstitial Radioelement Application (At The Time Of Or	
20555 Subsequent To The Procedure)	\$309.35
20600 Aspiration And/Or Injection Of Small Joint Or Joint Capsule	\$54.92
20604 Aspiration And/Or Injection Of Small Joint Or Joint Capsule With Recording And Reporting Using Ultrasound Guidance	\$78.89
20605 Aspiration And/Or Injection Of Medium Joint Or Joint Capsule	\$56.73
20606 Aspiration And/Or Injection Of Intermediate Joint Or Joint Capsule With Recording And Reporting Using Ultrasound Guidance	\$86.88
20610 Aspiration And/Or Injection Of Large Joint Or Joint Capsule 20611 Aspiration And/Or Injection Of Major Joint Or Joint Capsule With Recording And Reporting Using Ultrasound Guidance	\$66.92
20612 Aspiration And/Or Injection Of Major Joint Of Soint Capsule With Recording And Reporting Osing Offiasound Guidance 20612 Aspiration And/Or Injection Of Ganglion Cyst(S) Any Location	\$99.09 \$57.06
20012 Aspiration And Injection for Ganglion Cyst 20015 Aspiration And Injection For Treatment Of Bone Cyst	\$239.52
20019 Aspiration And injection For Treatment of Bone Cyst 20650 Insertion Of Wire Or Pin For Skeletal Traction, Including Removal (Separate Procedure)	\$153.68
20660 Application Of Cranial Tongs, Caliper, Or Stereotactic Frame, Including Removal (Separate Procedure)	\$206.80
20661 Placement Of Stabilizing Device To Skull	\$442.08
20662 Application Of Pelvic Halo Device (Stabilization Device For Pelvis)	\$477.73
20663 Placement Of Stabilizing Device To Thigh	\$440.81
20664 Application Of Cranial Halo (Stabilization Device For Skull)	\$777.87
20665 Removal Of Stabilizing Device From Head Originally Applied By Other Provider	\$109.70
20670 Removal Of Surface Implant From Bone	\$386.39
20680 Removal Of Deep Implant From Bone	\$617.47
20690 Placement Of Single Direction External Bone Stabilizing Device To Arm Or Leg	\$397.38
20692 Placement Of Multiple Direction External Bone Stabilizing Device To Arm Or Leg	\$1,099.75
20693 Revision Of External Bone Stabilizing Device Under Anesthesia	\$408.03
20694 Removal Of External Bone Stabilizing Device Under Anesthesia	\$294.67
20696 Placement Of Multiple Direction External Bone Stabilizing Device To Arm Or Leg Using Imaging	\$1,075.84
20697 Placement Of Multiple Direction External Bone Stabilizing Device To Arm Or Leg Using Imaging Guidance	\$1,846.87
20700 Preparation And Insertion Of Drug-Delivery Devices Beneath Fibrous Covering Of Muscle	\$84.26
20701 Removal Of Drug-Delivery Devices From Beneath Fibrous Covering Of Muscle	\$63.13
20702 Preparation And Insertion Of Drug-Delivery Devices Into Marrow Cavity Of Bone	\$127.66
20703 Removal Of Drug-Delivery Devices From Marrow Cavity Of Bone	\$92.83
20704 Preparation And Insertion Of Drug-Delivery Devices Into Joint	\$145.80
L 2070ETPomoval Of Drug Dalivary Davisas Into Taint	\$110.72
20705 Removal Of Drug-Delivery Devices Into Joint	\$2,464.05
20802 Replantation, Arm; Complete	@O OO 4 O 4
20802 Replantation, Arm; Complete 20805 Replantation, Forearm (Includes Radius And Ulna To Radial Carpal Joint); Complete Amputation	\$2,924.34 \$3,525.00
20802 Replantation, Arm; Complete 20805 Replantation, Forearm (Includes Radius And Ulna To Radial Carpal Joint); Complete Amputation 20808 Replantation, Hand; Complete	\$3,525.09
20802 Replantation, Arm; Complete 20805 Replantation, Forearm (Includes Radius And Ulna To Radial Carpal Joint); Complete Amputation 20808 Replantation, Hand; Complete 20816 Replantation, Digit; Complete	\$3,525.09 \$1,844.88
20802 Replantation, Arm; Complete 20805 Replantation, Forearm (Includes Radius And Ulna To Radial Carpal Joint); Complete Amputation 20808 Replantation, Hand; Complete 20816 Replantation, Digit; Complete 20822 Replantation, Digit, Excluding Thumb (Includes Distal Tip To Sublimis Tendon Insertion); Complete Amputation	\$3,525.09 \$1,844.88 \$1,597.16
20802 Replantation, Arm; Complete 20805 Replantation, Forearm (Includes Radius And Ulna To Radial Carpal Joint); Complete Amputation 20808 Replantation, Hand; Complete 20816 Replantation, Digit; Complete	\$3,525.09 \$1,844.88

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	Description Page Creft Any Description Page Creft Any Description Page Creft Any Description	Fee
	Bone Graft, Any Donor Area; Minor Or Small (Eg, Dowel Or Button) Bone Graft, Any Donor Area; Major Or Large	\$333.38 \$276.22
	Cartilage Graft; Costochondral	\$415.93
	Cartilage Graft; Nasal Septum	\$445.20
20920	Fascia Lata Graft; By Stripper	\$368.79
	Fascia Lata Graft; By Incision And Area Exposure, Complex Or Sheet	\$442.84
	Tendon Graft, From A Distance (Eg, Palmaris, Toe Extensor, Plantaris)	\$463.52
	Fragmented Donor Bone Graft Or Placement Of Material To Promote Bone Growth For Spine Surgery	\$202.89
	Structural Donor Bone Graft For Spine Surgery	\$105.17
	Donor Bone And Joint Graft To Joint Surface And Neighboring Bone Half-Cylindrical Donor Bone Graft	\$671.72
	Cylindrical Donor Bone Graft	\$616.68 \$671.07
20334	Autograft For Spine Surgery Only (Includes Harvesting The Graft); Local (Eg, Ribs, Spinous Process, Or Laminar Fragments) Obtained From	ψ0/1.0/
20936	Same Incision (List Separately In Addition To Code For Primary Procedure)	\$250.62
	Autograft For Spine Surgery Only (Includes Harvesting The Graft); Morselized (Through Separate Skin Or Fascial Incision) (List Separately In	
20937	Addition To Code For Primary Procedure)	\$160.98
20020	Autograft For Spine Surgery Only (Includes Harvesting The Graft); Structural, Bicortical Or Tricortical (Through Separate Skin Or Fascial	¢157.70
	Incision) (List Separately In Addition To Code For Primary Procedure) Harvest Of Bone Marrow For Spine Surgery Graft	\$157.72 \$68.34
20939	Monitoring Of Interstitial Fluid Pressure (Includes Insertion Of Device Eg, Wick Catheter Technique, Needle Manometer Technique) In Detection	φ00.34
20950	Of Muscle Compartment Syndrome	\$188.81
	Bone Graft With Microvascular Anastomosis; Fibula	\$2,495.43
20956	Bone Graft With Microvascular Anastomosis; Iliac Crest	\$2,370.29
20957	Bone Graft With Microvascular Anastomosis; Metatarsal	\$2,469.50
	Bone Graft With Microvascular Anastomosis; Other Than Fibula, Iliac Crest, Or Metatarsal	\$2,400.64
	Free Osteocutaneous Flap With Microvascular Anastomosis; Other Than Iliac Crest, Metatarsal, Or Great Toe	\$2,750.94
	Free Osteocutaneous Flap With Microvascular Anastomosis; Iliac Crest	\$2,554.93
	Free Osteocutaneous Flap With Microvascular Anastomosis; Metatarsal	\$2,546.96
	Free Osteocutaneous Flap With Microvascular Anastomosis; Great Toe With Web Space Destruction Of 1 Or More Bone Growths Accessed Through The Skin	\$2,689.82
	Destruction Of 1 Or More Bone Growths, Accessed Through The Skin	\$3,524.05 \$5,747.67
20963	Computer-Assisted Surgical Navigational Procedure For Musculoskeletal Procedures, Image-Less (List Separately In Addition To Code For	\$5,747.67
20985	Primary Procedure)	\$143.42
	Unlisted Procedure, Musculoskeletal System, General	Price By Report
21010	Arthrotomy, Temporomandibular Joint	\$692.79
21011	Excision, Tumor, Soft Tissue Of Face Or Scalp, Subcutaneous; Less Than 2 Cm	\$333.83
	Removal Of (2 Centimeters Or Greater) Tissue Growth Beneath The Skin Of Face And Scalp	\$358.25
	Excision, Tumor, Soft Tissue Of Face And Scalp, Subfascial (Eg, Subgaleal, Intramuscular); Less Than 2 Cm	\$519.32
	Excision, Tumor, Soft Tissue Of Face And Scalp, Subfascial (Eg, Subgaleal, Intramuscular); 2 Cm Or Greater	\$553.74
	Removal Of (Less Than 2 Centimeters) Soft Tissue Growth Of Face Or Scalp	\$640.65
	Removal Of (2 Centimeters Or Greater) Soft Tissue Growth Of Face Or Scalp Excision Of Bone (Eg, For Osteomyelitis Or Bone Abscess) Mandible	\$913.82 \$742.15
	Excision of Bone (Eg, For Osteomyelitis Or Bone Abscess) Facial Bone(S)	\$506.06
	Removal By Contouring Of Benign Tumor Of Facial Bone (Eg, Fibrous Dysplasia)	\$718.12
	Excision Of Benign Tumor Or Cyst Of Maxilla Or Zygoma By Enucleation And Curettage	\$432.96
	Excision Of Torus Mandibularis	\$367.84
21032	Excision Of Maxillary Torus Palatinus	\$354.86
	Excision Of Malignant Tumor Of Maxilla Or Zygoma	\$1,209.87
	Excision Of Benign Tumor Or Cyst Of Mandible, By Enucleation And/Or Curettage	\$326.94
	Excision Of Malignant Tumor Of Mandible;	\$799.70
21045	Excision Of Malignant Tumor Of Mandible; Radical Resection	\$1,105.70
21046	Excision Of Benign Tumor Or Cyst Of Mandible; Requiring Intra-Oral Osteotomy (Eg, Locally Aggressive Or Destructive Lesion(S))	\$939.08
21010	Excision Of Benign Tumor Or Cyst Of Mandible; Requiring Extra-Oral Osteotomy And Partial Mandibulectomy (Eg. Locally Aggressive Or	Ψ000.00
21047	Destructive Lesion(S))	\$1,157.96
	Excision Of Benign Tumor Or Cyst Of Maxilla; Requiring Intra-Oral Osteotomy (Eg, Locally Aggressive Or Destructive Lesion(S))	\$946.07
	Excision Of Benign Tumor Or Cyst Of Maxilla; Requiring Extra-Oral Osteotomy And Partial Maxillectomy (Eg, Locally Aggressive Or Destructive	
	Lesion(S))	\$1,121.30
	Arthrectomy, Temporomandibular Joint; Unilateral	\$811.85
	Meniscectomy, Temporomandibular Joint; Unilateral	\$735.74
∠10/0	Coronoidectomy (Separate Procedure)	\$566.86
21073	Manipulation Of Temporomandibular Joint(S) (Tmj), Therapeutic, Requiring An Anesthesia Service (Ie, General Or Monitored Anesthesia Care)	\$357.82
	Impression And Custom Preparation; Surgical Obturator Prosthesis	\$888.55
	Impression And Custom Preparation; Orbital Prosthesis	\$1,965.03
	Impression And Custom Preparation; Interim Obturator Prosthesis	\$1,348.68
	Impression And Custom Preparation; Definitive Obturator Prosthesis	\$1,561.58
	Impression And Custom Preparation; Mandibular Resection Prosthesis	\$1,433.31
	Impression And Custom Preparation; Palatal Augmentation Prosthesis	\$1,316.56
	Impression And Custom Preparation; Palatal Lift Prosthesis	\$1,258.08
	Impression And Custom Preparation; Speech Aid Prosthesis	\$1,435.34
	Impression And Custom Preparation Of Oral Surgical Splint	\$733.40
24000	Impression And Custom Preparation: Auricular Prosthesis	
	Impression And Custom Preparation; Auricular Prosthesis	\$1,463.89 \$1,463.89
21087	Impression And Custom Preparation; Nasal Prosthesis	\$1,463.89
21087 21088		\$1,463.89 \$1,373.33
21087 21088 21089	Impression And Custom Preparation; Nasal Prosthesis Impression And Custom Preparation; Facial Prosthesis	\$1,463.89

Code Description	Fee
21110 Application Of Interdental Fixation Device For Conditions Other Than Fracture Or Dislocation	\$842.24
21116 Injection Procedure For Temporomandibular Arthrotomography	\$215.55
21120 Genioplasty; Augmentation (Autograft, Allograft, Prosthetic Material)	\$629.52
21121 Genioplasty; Sliding Osteotomy, Single Piece	\$599.64
21122 Genioplasty; Sliding Osteotomies, Two Or More Osteotomies (Eg, Wedge Excision Or Bone Wedge Reversal For Asymmetrical Chin)	\$695.10
21123 Insertion Of Sliding Bone Graft To Enlarge Chin Bone, Additional Bone Graft 21125 Augmentation, Mandibular Body Or Angle; Prosthetic Material	\$800.84
21125 Augmentation, Mandibular Body Or Angle; Prostrictic Material 21127 Augmentation, Mandibular Body Or Angle; With Bone Graft, Onlay Or Interpositional (Includes Obtaining Autograft	\$2,617.85 \$4,020.10
21137 Reduction Forehead; Contouring Only	\$686.61
21138 Reduction Forehead; Contouring And Application Of Prosthetic Material Or Bone Graft (Includes Obtaining Autograft)	\$834.65
21139 Reduction Forehead; Contouring And Setback Of Anterior Frontal Sinus Wall	\$999.98
21141 Reconstruction Of Midface Bones, Single Piece (Lefort I)	\$1,411.71
21142 Reconstruction Of Midface Bones, 2 Pieces (Lefort I)	\$1,420.94
21143 Reconstruction Of Midface Bones, 3 Or More Pieces (Lefort I)	\$1,317.19
21145 Reconstruction Of Midface Bones With Bone Graft, Single Piece (Lefort I) 21146 Reconstruction Of Midface Bones With Bone Graft, 2 Pieces (Lefort I)	\$1,447.15
21146 Reconstruction of Midface Bones With Bone Graft, 3 Or More Pieces (Lefort I)	\$1,511.07 \$1,589.85
21150 Reconstruction Of Midface Bones (Lefort Ii)	\$1,511.98
21151 Reconstruction Of Midface Bones With Bone Graft (Lefort li)	\$1,662.28
21154 Reconstruction Of Midface Bones With Bone Graft Without Lefort I (Lefort Iii)	\$1,788.33
21155 Reconstruction Of Midface Bones With Bone Graft With Lefort I (Lefort Iii)	\$1,981.62
21159 Reconstruction Of Midface Bones With Bone Graft With Forehead Advancement, Without Lefort I (Lefort Iii)	\$2,371.52
21160 Reconstruction Of Midface Bones With Bone Graft With Forehead Advancement, With Lefort I (Lefort Iii)	\$2,570.61
Reconstruction Superior-Lateral Orbital Rim And Lower Forehead, Advancement Or Alteration, With Or Without Grafts (Includes Obtaining Autografts)	\$1,832.82
Reconstruction, Bifrontal, Superior-Lateral Orbital Rims And Lower Forehead, Advancement Or Alteration (Eg, Plagiocephaly, Trigonocephaly,	# 0.010.==
21175 Brachycephaly), With Or Without Grafts (Includes Obtaining Autografts) 21179 Reconstruction, Entire Or Majority Of Forehead And/Or Supraorbital Rims; With Grafts (Allograft Or Prosthetic Material)	\$2,010.37
21179 Reconstruction, Entire Or Majority Of Forehead And/Or Supraorbital Rims, With Grans (Allogrant Or Prostrict Material) 21180 Reconstruction, Entire Or Majority Of Forehead And/Or Supraorbital Rims; With Autograft (Includes Obtaining Grafts)	\$1,384.19 \$1,544.90
21181 Removal By Contouring Of Benign Tumor Of Cranial Bones (Eg, Fibrous Dysplasia), Extracranial	\$677.24
Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Less	Ψ077.21
21182 Than 40 Sq Cm	\$1,918.61
Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting	
21183 Greater Than 40 Sq Cm But Less Than 80 Sq Cm	\$2,086.10
Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting 21184 Greater Than 80 Sq Cm	¢2 242 97
21188 Repair Of Bony Defect Of Midface Through Scalp, Eyelid, And Oral Incisions With Bone Graft	\$2,242.87 \$1,481.78
21193 Reconstruction Of Mandibular Rami, Horizontal, Vertical, "C", Or "L" Osteotomy; Without Bone Graft	\$1,194.80
21194 Reconstruction Of Mandibular Ramus, Horizontal, Vertical, "C", Or "L" Osteotomy; With Bone Graft (Includes Obtaining Graft)	\$1,330.20
21195 Reconstruction Of Mandibular Rami And/Or Body, Sagittal Split; Without Internal Rigid Fixation	\$1,259.34
21196 Reconstruction Of Mandibular Ramus, Sagittal Split; With Internal Rigid Fixation	\$1,320.23
21198 Osteotomy, Mandible, Segmental	\$960.27
21199 Osteotomy, Mandible, Segmental; With Genioglossus Advancement 21206 Osteotomy, Maxilla, Segmental (Eg, Wassmund Or Schuchard)	\$945.72 \$905.09
21208 Osteoplasty, Facial Bones Augmentation (Autograft, Allograft, Or Prosthetic Implant)	\$1,610.32
21209 Osteoplasty, Facial Bones Reduction	\$733.81
21210 Graft, Bone, Nasal, Maxillary And Malar Areas (Includes Obtaining Graft)	\$1,595.61
21215 Graft, Bone; Mandible (Includes Obtaining Graft)	\$3,006.83
21230 Graft; Rib Cartilage, Autogenous, To Face, Chin, Nose Or Ear (Includes Obtaining Graft)	\$764.45
21235 Graft; Ear Cartilage, Autograft, To Nose Or Ear (Includes Obtaining Graft)	\$602.76
21240 Arthroplasty, Temporomandibular Joint, With Or Without Autograft (Includes Obtaining Graft)	\$975.32
21242 Arthroplasty, Temporomandibular Joint, With Alloplastic Material (Eg, Silicone) 21243 Arthroplasty, Temporomandibular Joint, With Prosthetic Joint Replacement	\$944.97 \$1,493.54
21244 Reconstruction Of Mandible, Extraoral, With Transosteal Bone Plate (Eg, Mandibular Staple Bone Plate)	\$938.02
21245 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Partial	\$1,107.74
21246 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete	\$792.83
24247 Decembration Of Mandibular Condula With Dans And Configuration (Includes Obstation Config.) (For Footback Configuration)	04 470 5 :
21247 Reconstruction Of Mandibular Condyle With Bone And Cartilage Autografts (Includes Obtaining Grafts) (Eg, For Hemifacial Microsomia) 21248 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg, Blade, Cylinder); Partial	\$1,473.54
21248 Reconstruction Of Mandible Of Maxilla, Endosteal Implant (Eg, Blade, Cylinder); Partial 21249 Reconstruction Of Mandible Of Maxilla, Endosteal Implant Complete	\$925.25 \$1,256.34
21255 Reconstruction Of Zygomatic Arch And Glenoid Fossa With Bone And Cartilage (Includes Obtaining Autografts)	\$1,256.37
21256 Reconstruction Of Orbit With Osteotomies (Extracranial) And With Bone Grafts (Includes Obtaining Autografts) (Eg, Microophthalmia)	\$1,128.93
21260 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Extracranial Approach	\$1,261.62
21261 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Combined Intra- And Extracranial Approach 21263 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement	\$2,220.91
21263 Periordial Osteofornies For Orbital Hyperteiorism, with Bone Grafts, With Forenead Advancement 21267 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach	\$2,057.03 \$1,475.39
21268 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Combined Approach	\$1,845.46
21270 Malar Augmentation, Prosthetic Material	\$939.67
21275 Secondary Revision Of Orbitocraniofacial Reconstruction	\$772.87
21280 Reattachment Of Nasal And Eye Socket Ligament, Ear Side	\$545.91
21282 Reattachment Of Nasal And Eye Socket Ligament, Nose Side	\$370.44
21295 Reduction Of Masseter Muscle And Bone (Eg, For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach	\$182.71
21296 Reduction Of Masseter Muscle (Eg, Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach 21299 Unlisted Craniofacial And Maxillofacial Procedure	\$381.08 Price By Report
21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization	\$115.57
21320 Manipulative Treatment, Nasal Bone Fracture; Without Stabilization With Stabilization	\$232.31

Code Description	Fee
21325 Open Treatment Of Nasal Fracture; Uncomplicated	\$319.64
21330 Open Treatment Of Nasal Fracture; Complicated, With Internal And/Or External Skeletal Fixation	\$504.21
21335 Open Treatment Of Nasal Fracture; With Concomitant Open Treatment Of Fractured Septum	\$742.76
21336 Open Treatment Of Nasal Septal Fracture, With Or Without Stabilization	\$607.19
21337 Closed Treatment Of Nasal Septal Fracture, With Or Without Stabilization	\$292.59
21338 Open Treatment Of Nasoethmoid Fracture; Without External Fixation	\$636.07
21339 Open Treatment Of Nasoethmoid Fracture; Without External Fixation With External Fixation 21340 Treatment Of Broken Eye Socket And Nasal Bones, Accessed Through The Skin	\$716.40 \$692.94
21343 Open Treatment Of Depressed Frontal Sinus Fracture	\$1,014.59
21043 Open Treatment of Depressed Fortial Offices Treatment	ψ1,014.59
21344 Open Treatment Of Complicated (Eg, Comminuted Or Involving Posterior Wall) Frontal Sinus Fracture, Via Coronal Or Multiple Approaches	\$1,289.75
21345 Closed Treatment Of Nasomaxillary Complex Fracture (Lefort li Type), With Interdental Wire Fixation Or Fixation Of Denture Or Splint	\$750.78
21346 Open Treatment Of Nasomaxillary Complex Fracture (Lefort li Type); With Wiring And/Or Local Fixation	\$970.15
21347 Open Treatment Of Nasomaxillary Complex Fracture (Lefort li Type); Requiring Multiple Open Approaches	\$973.68
21348 Open Treatment Of Nasomaxillary Complex Fracture (Lefort li Type); With Bone Grafting (Includes Obtaining Graft)	\$1,005.09
21355 Treatment Of Broken Lower And Upper Cheek Bones With Manipulation, Accessed Through The Skin	\$421.05
21356 Open Treatment Of Broken Cheek Bone, Zygoma Fracture	\$434.36
21360 Open Treatment Of Broken Cheek Bone, Malar Fracture	\$484.34
Open Treatment Of Complicated (Eg, Comminuted Or Involving Cranial Nerve Foramina) Fracture(S) Of Malar Area, Including Zygomatic Arch	¢4.000.00
21365 And Malar Tripod; With Internal Fixation And Multiple Surgical Approaches Open Treatment Of Complicated (Eq. Comminuted Or Involving Cranial Nerve Foramina) Fracture(S) Of Malar Area, Including Zygomatic Arch	\$1,086.30
21366 And Malar Tripod; With Bone Grafting (Includes Obtaining Graft)	\$1,162.69
21385 Open Treatment Of Broken Eye Socket Bone, Blowout Fracture, Transantral Approach	\$674.90
21386 Open Treatment of Broken Eye Socket Bone, Blowout Fracture, Periorbital Approach	\$742.85
21387 Open Treatment Of Broken Eye Socket Bone, Blowout Fracture, Combined Approach	\$703.71
21390 Open Treatment Of Broken Eye Socket Bone With Implant, Blowout Fracture	\$826.06
21395 Open Treatment Of Broken Eye Socket Bone With Bone Graft, Blowout Fracture	\$920.69
21400 Closed Treatment Of Fracture Of Orbit, Except "Blowout"; Without Manipulation	\$199.71
21401 Closed Treatment Of Broken Eye Socket Bone With Manipulation	\$354.52
21406 Open Treatment Of Broken Eye Socket Bone Without Implant, Other Than Blowout Fracture	\$537.38
21407 Open Treatment Of Broken Eye Socket Bone With Implant, Other Than Blowout Fracture	\$631.95
21408 Open Treatment Of Broken Eye Socket Bone With Bone Graft Other Than Blowout Fracture	\$825.04
21421 Closed Treatment Of Palatal Or Maxillary Fracture (Lefort I Type), With Interdental Wire Fixation Or Fixation Of Denture Or Splint	\$618.00
21422 Open Treatment Of Fracture At Roof Of Mouth Or Cheek Bone (Lefort I)	\$645.42
21423 Open Treatment Of Fracture At Roof Of Mouth Or Cheek Bone (Lefort I), Complicated	\$733.55
21431 Closed Treatment Of Broken Bones Of Cheek, Nose Or Face With Insertion Of Hardware Or Oral Splint (Lefort Iii)	\$663.97
21432 Open Treatment Of Broken Bones Of Face (Lefort Iii) And Head And/Or Insertion Of Hardware 21433 Open Treatment Of Broken Bones Of Face And Head (Lefort Iii), Complicated	\$665.90 \$1,575.05
21435 Open Treatment of Broken Bones of Face And Head And/Or Insertion Of Hardware (Lefort Iii), Complicated	\$1,373.03
21436 Open Treatment Of Broken Bones Of Face And Head With Insertion Of Hardware And Bone Graft (Lefort Iii), Complicated	\$1,850.08
21440 Closed Treatment Of Mandibular Or Maxillary Alveolar Ridge Fracture (Separate Procedure)	\$670.91
21445 Open Treatment Of Mandibular Or Maxillary Alveolar Ridge Fracture (Separate Procedure)	\$569.07
21450 Closed Treatment Of Mandibular Fracture; Without Manipulation	\$423.87
21451 Closed Treatment Of Mandibular Fracture; With Manipulation	\$748.02
21452 Treatment Of Broken Jaw Bone With Placement Of External Hardware, Accessed Through The Skin	\$740.39
21453 Closed Treatment Of Mandibular Fracture With Interdental Fixation	\$779.14
21454 Open Treatment Of Mandibular Fracture With External Fixation	\$454.10
21461 Open Treatment Of Mandibular Fracture; Without Interdental Fixation	\$1,312.30
21462 Open Treatment Of Closed Or Open Mandibular Fracture; With Interdental Fixation	\$1,434.43
21465 Open Treatment Of Mandibular Condylar Fracture	\$739.94
Open Treatment Of Complicated Mandibular Fracture By Multiple Surgical Approaches Including Internal Fixation, Interdental Fixation, And/Or	£4.404.00
21470 Wiring Of Dentures Or Splints 21480 Closed Treatment Of Jaw Temporomandibular Joint (Tmj) Dislocation, Uncomplicated	\$1,191.88
21485 Closed Treatment Of Jaw Temporomandibular Joint (Tmj) Dislocation, Oncomplicated	\$99.48 \$954.36
21490 Open Treatment Of Temporomandibular Dislocation	\$728.70
21497 Interdental Wiring, For Condition Other Than Fracture	\$506.95
21499 Unlisted Orthopedic Procedure, Head	Price By Report
21501 Incision And Drainage, Deep Abscess Or Hematoma;	\$337.29
21502 Incision And Drainage, Deep Abscess Or Hematoma; With Partial Rib Ostectomy	\$457.77
21510 Incision, Deep, With Opening Of Bone Cortex (Eg, For Osteomyelitis Or Bone Abscess);	\$410.42
21550 Excisional Biopsy, Soft Tissues	\$187.79
21552 Biopsy, Soft Tissue Of Neck Or Thorax 3 Cm Or Greater	\$476.09
21554 Biopsy, Soft Tissue Of Neck Or Thorax 5 Cm Or Greater	\$733.85
21555 Excision, Tumor, Soft Tissue Of Neck Or Anterior Thorax, Subcutaneous; Less Than 3 Cm	\$301.32
21556 Excision, Tumor, Soft Tissue Of Neck Or Anterior Thorax, Subfascial (Eg, Intramuscular); Less Than 5 Cm	\$355.74
21557 Removal Of (Less Than 5 Centimeters) Growth Of Neck Or Front Of Chest	\$861.77
21558 Removal Of (5 Centimeters Or Greater) Growth Of Neck Or Front Of Chest 21600 Excision Of Rib, Partial	\$1,204.22 \$510.03
21601 Removal Of Tumor From Chest Wall Including Ribs	\$510.02 \$1,174.32
	\$1,174.32
21602 Removal Of Tumor From Chest Wall Including Ribs With Plastic Reconstruction	\$1,509.83
21602 Removal Of Tumor From Chest Wall Including Ribs With Plastic Reconstruction 21603 Removal Of Tumor From Chest Wall Including Ribs With Plastic Reconstruction And Removal Of Lymph Nodes From Chest Cavity	
21603 Removal Of Tumor From Chest Wall Including Ribs With Plastic Reconstruction And Removal Of Lymph Nodes From Chest Cavity	\$1 041 59
21603 Removal Of Tumor From Chest Wall Including Ribs With Plastic Reconstruction And Removal Of Lymph Nodes From Chest Cavity 21610 Costotransversectomy (Separate Procedure)	\$1,041.59 \$601.91 \$623.10
21603 Removal Of Tumor From Chest Wall Including Ribs With Plastic Reconstruction And Removal Of Lymph Nodes From Chest Cavity 21610 Costotransversectomy (Separate Procedure) 21615 Excision First And/Or Cervical Rib;	\$601.91
21603 Removal Of Tumor From Chest Wall Including Ribs With Plastic Reconstruction And Removal Of Lymph Nodes From Chest Cavity 21610 Costotransversectomy (Separate Procedure) 21615 Excision First And/Or Cervical Rib; 21616 Excision First And/Or Cervical Rib For Outlet Compression Syndrome Or Other Cause; With Sympathectomy	\$601.91 \$623.10

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	Description Radical Resection Of Sternum; With Mediastinal Lymphadenectomy	Fee \$1,075.28
	Hyoid Myotomy And Suspension	\$1,075.26
	Division Of Scalenus Anticus; Without Resection Of Cervical Rib	\$311.49
	Division Of Scalenus Anticus; With Resection Of Cervical Rib	\$515.28
	Release Of Tendons Of Neck Muscle, Open Procedure	\$446.36
	Release Of Tendons Of Neck Muscle With Cast Application, Open Procedure	\$496.56
	Repair Of Depression Of Breast Bone, Open Procedure	\$903.16
	Reconstructive Repair Of Pectus Excavatum Or Carinatum; Minimally Invasive Approach (Nuss Procedure), Without Thoracoscopy	\$988.39
	Reconstructive Repair Of Pectus Excavatum Or Carinatum; Minimally Invasive Approach (Nuss Procedure), With Thoracoscopy	\$1,060.40
	Closure Of Median Sternotomy Separation With Or Without Debridement (Separate Procedure)	\$665.55
	Open Treatment Of Broken Ribs With Insertion Of Hardware, 1-3 Ribs	\$593.78
	Open Treatment Of Broken Ribs With Insertion Of Hardware, 4-6 Ribs	\$713.44
	Open Treatment Of Broken Ribs With Insertion Of Hardware, 7 Or More Ribs	\$859.25
	Closed Treatment Of Sternum Fracture	\$139.77
	Open Treatment Of Sternum Fracture With Or Without Skeletal Fixation	\$496.37
	Unlisted Procedure, Neck Or Thorax	Price By Report
	Biopsy Of Tissue Of Back Or Flank, Superficial	\$181.56
	Biopsy Of Tissue Of Back Or Flank, Deep	\$463.63
	Excision, Tumor, Soft Tissue Of Back Or Flank	\$382.15
	Excision, Tumor, Soft Tissue Of Back Or Flank, Subcutaneous; 3 Cm Or Greater	\$497.60
	Excision, Tumor, Soft Tissue Of Back Or Flank, Subfascial (Eg, Intramuscular); Less Than 5 Cm	\$665.46
	Excision, Tumor, Soft Tissue Of Back Or Flank, Subfascial (Eg, Intramuscular); 5 Cm Or Greater	\$738.80
	Removal (Less Than 5 Centimeters) Tissue Growth Of Back Or Flank	\$920.97
	Removal (5 Centimeters Or Greater) Tissue Growth Of Back Or Flank	\$1,260.22
	Drainage Of Abscess Of Upper Or Middle Spine, Open Chest Procedure	\$939.26
	Drainage Of Abscess Of Lower Spine Or Sacrum, Open Procedure	\$939.20
22010	Granage Granades Grane Granadani, Open Freedad	Ψ332.10
22100	Partial Removal Of Rear Component Of Spine Bone With Bone Tissue Abnormality In 1 Vertebral Segment Of Neck (Cervical Spine)	\$774.78
22101	Partial Removal Of Rear Component Of Spine Bone With Bone Tissue Abnormality In 1 Vertebral Segment Of Upper Back (Thoracic Spine)	\$771.48
	Partial Removal Of Rear Component Of Spine Bone With Bone Tissue Abnormality In 1 Vertebral Segment Of Lower Back (Lumber Spine)	\$709.42
22103	Partial Removal Of Rear Component Of Spine Bone With Bone Tissue Abnormality From Additional Vertebral Segment Of Spine	\$118.74
	Partial Removal Of Front Component Of Spine Bone (Vertebral Body) With Bone Tissue Abnormality In 1 Vertebral Segment Of Neck (Cervical	
22110	Spine)	\$932.98
	Partial Removal Of Front Component Of Spine Bone (Vertebral Body) With Bone Tissue Abnormality In 1 Vertebral Segment Of Upper Back	
22112	(Thoracic Spine)	\$988.41
	Partial Removal Of Front Component Of Spine Bone (Vertebral Body) With Bone Tissue Abnormality In 1 Vertebral Segment Of Lower Back	
22114	(Lumbar Spine)	\$988.41
00440	Desiries Desiries Communication of Communication (Communication)	
	Partial Removal Of Front Component Of Spine Bone (Vertebral Body) With Bone Tissue Abnormality In Additional Vertebral Segment Of Spine	\$121.11
22206	Extensive Incision Of Spinal Column (3-Column Osteotomy) In Upper Back (Thoracic Spine) To Correct Deformity	
22207	Extensive Incision Of Spinal Column (3-Column Osteotomy) In 1 Vertebral Segment Of Lower Back (Lumbar Spine) To Correct Deformity	\$2,441.71
	Extensive modern of opinior occurring to occurring the residence of the principle of the occurrence of the principle of the occurrence of	
22208	Extensive Incision Of Spinal Column (3-Column Osteotomy) In 1 Additional Vertebral Segment Of Spine	\$2,104.42
	Extensive Incision Of Spinal Column (3-Column Osteotomy) In 1 Additional Vertebral Segment Of Spine Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity	\$2,104.42 \$560.60
	Extensive Incision Of Spinal Column (3-Column Osteotomy) In 1 Additional Vertebral Segment Of Spine Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity	\$2,104.42
22210		\$2,104.42 \$560.60
22210	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15
22210 22212 22214	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15
22210 22212 22214 22216	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71
22210 22212 22214 22216 22220	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment, Cervical	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94
22210 22212 22214 22216 22220 22222	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73
22210 22212 22214 22216 22220 22222	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94
22210 22212 22214 22216 22220 22222 22224	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89
22210 22212 22214 22216 22220 22222 22224 22224	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure)	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89
22210 22212 22214 22216 22220 22222 22224 22226 22310	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44
22210 22212 22214 22216 22220 22222 22224 22226 22310 22315	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment, Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment, Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06
22210 22212 22214 22216 22220 22222 22224 22226 22310 22315 22318	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06 \$1,421.57
22210 22212 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones With Bone Graft, Anterior Approach	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06 \$1,421.57 \$1,573.10
22210 22212 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22325	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones With Bone Graft, Anterior Approach Open Treatment Of Broken And/Or Dislocated Lower Spine Bones, Posterior Approach	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06 \$1,421.57 \$1,573.10
22210 22214 22214 22216 22220 22224 22226 22310 22315 22318 22319 22325 22326	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06 \$1,421.57 \$1,573.10 \$1,220.75
22210 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22325 22326 22327	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Lower Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06 \$1,421.57 \$1,573.10 \$1,220.75 \$1,464.10 \$1,416.86
22210 22212 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22325 22326 22327 22328	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Lower Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06 \$1,421.57 \$1,573.10 \$1,220.75 \$1,464.10 \$1,416.86 \$266.93
22210 22212 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22325 22326 22327 22328	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Lower Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06 \$1,421.57 \$1,573.10 \$1,220.75 \$1,464.10 \$1,416.86
22210 22214 22214 22216 22220 22222 22224 222310 22315 22318 22319 22325 22326 22327 22328 22505	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Lower Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06 \$1,421.57 \$1,573.10 \$1,220.75 \$1,464.10 \$1,416.86 \$266.93 \$116.93
22210 22214 22216 22220 22222 22224 22226 22315 22315 22318 22327 22328 22505	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Lower Spine Bones With Bone Graft, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, P	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06 \$1,421.57 \$1,573.10 \$1,220.75 \$1,464.10 \$1,416.86 \$266.93 \$116.93
22210 22214 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22326 22327 22328 22505	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones With Bone Graft, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06 \$1,421.57 \$1,573.10 \$1,220.75 \$1,464.10 \$1,416.86 \$266.93 \$116.93 \$1,814.58
22210 22214 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22326 22327 22328 22505	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment, Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones With Bone Graft, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated William Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones Accessed Through The Skin Using Imagin	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06 \$1,421.57 \$1,573.10 \$1,220.75 \$1,464.10 \$1,416.86 \$266.93 \$116.93 \$1,814.58
22210 22214 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22326 22327 22328 22505 22510	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones With Bone Graft, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones Accessed Through The S	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06 \$1,421.57 \$1,573.10 \$1,220.75 \$1,464.10 \$1,416.86 \$266.93 \$116.93 \$1,814.58
22210 22214 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22325 22326 22327 22328 22505 22510 22511 22512	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Tr	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06 \$1,421.57 \$1,573.10 \$1,220.75 \$1,464.10 \$1,416.86 \$266.93 \$116.93 \$1,920.95 \$723.45
22210 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22325 22326 22327 22328 22510 22511 22512	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatme	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06 \$1,421.57 \$1,573.10 \$1,220.75 \$1,464.10 \$1,416.86 \$266.93 \$116.93 \$1,920.95 \$723.45
22210 22214 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22325 22326 22327 22328 22505 22511 22512	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated With Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones Accessed Through The Skin Using Imaging Guidance In The Lower Spine Area Injec	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06 \$1,421.57 \$1,573.10 \$1,220.75 \$1,464.10 \$1,416.86 \$266.93 \$116.93 \$1,920.95 \$723.45 \$6,487.45 \$6,487.45 \$6,458.55
22210 22214 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22325 22326 22327 22328 22505 22510 22511 22512 22513 22513 22514 22515 22532	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Upper Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Notetrior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones Accessed Through The Skin Using Imaging Guidance In The Lower Spine Area Injection Of Bone Cement Into Body Of Middle Spine Bone Accessed Through The Skin Using Im	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,431.94 \$1,519.73 \$1,421.89 \$312.93 \$272.44 \$807.06 \$1,421.57 \$1,573.10 \$1,220.75 \$1,464.10 \$1,416.86 \$266.93 \$116.93 \$1,814.58 \$1,920.95 \$723.45
22210 22212 22214 22216 22220 22224 22226 22310 22315 22318 22319 22325 22326 22327 22328 22510 22511 22513 22514 22515 22532 22533	Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated With Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones Accessed Through The Skin Using Imaging Guidance In The Lower Spine Area Injec	\$2,104.42 \$560.60 \$1,574.18 \$1,506.15 \$1,419.05 \$348.71 \$1,421.85 \$1,519.73 \$1,421.85 \$272.44 \$807.06 \$1,421.57 \$1,573.16 \$1,220.75 \$1,464.10 \$1,416.86 \$266.93 \$116.93 \$1,920.95 \$723.45 \$6,487.45 \$6,458.55 \$3,006.94

	Description	Fee
	Fusion Of Spine Bones At Base Of Neck, Oral Approach	\$1,686.44
	Fusion Of Spine Bones With Removal Of Disc At Upper Spinal Column, Anterior Approach, Complex	\$1,648.26
	Fusion Of Spine Bones With Removal Of Disc In Upper Spinal Column Below Second Vertebra Of Neck , Anterior Approach	\$377.08
	Fusion Of Spine Bones With Removal Of Disc At Upper Spinal Column, Anterior Approach, Simple Fusion Of Middle Spine Bones With Removal Of Disc, Anterior Approach	\$1,106.47
	Fusion Of Spine Bones With Removal Of Disc, Afterior Approach Fusion Of Spine Bones With Removal Of Disc At Lower Spinal Column, Anterior Approach	\$1,463.58
	Fusion Of Spine Bones With Removal Of Disc At Lower Spinal Column, Anterior Approach	\$1,499.43
22363	Arthrodesis, Pre-Sacral Interbody Technique, Including Disc Space Preparation, Discectomy, With Posterior Instrumentation, With Image	\$312.29
22506	Guidance, Includes Bone Graft When Performed, L5-S1 Interspace	¢1 7/2 75
	Fusion Of First Two Upper Spine Bones Of Spinal Column, Posterior Approach	\$1,743.75 \$1,380.26
	Fusion Of Spine Bones At Skull Base, Posterior Approach	\$1,320.98
	Fusion Of Upper Spine Bones, Posterior Or Posterolateral Approach	\$1,140.83
	Fusion Of Middle Spine Bones, Posterior Or Posterolateral Approach	\$1,250.59
	Fusion Of Lower Spine Bones, Posterior Or Posterolateral Approach	\$1,555.53
	Fusion Of Spine Bones, Posterior Or Posterolateral Approach	
	Fusion Of Spine Bones With Removal Of Disc, Posterior Approach, Single Interspace	\$372.93
	Fusion Of Lower Spine Bones With Removal Of Disc, Posterior Approach, Single Interspace, Each Additional Interspace	\$1,531.96
		\$273.06
22633	Fusion Of Lower Spine Bones With Removal Of Disc, Posterior Or Posterolateral Approach, Single Interspace And Segment	\$1,799.00
22224	Fusion Of Lower Spine Bones With Removal Of Disc, Posterior Or Posterolateral Approach, Single Interspace And Segment, Each Additional	¢470.00
	Interspace And Segment	\$473.36
	Fusion Of Spine Bones For Correction Of Deformity, Posterior Approach, Up To 6 Vertebral Segments	\$1,341.80
	Fusion Of Spine Bones For Correction Of Deformity, Posterior Approach, 7 To 12 Vertebral Segments	\$2,072.60
	Fusion Of Spine Bones For Correction Of Deformity, Posterior Approach, 13 Or More Vertebral Segments	\$2,512.86
	Fusion Of Spine Bones For Correction Of Deformity, Anterior Approach, 2 To 3 Vertebral Segments	\$1,610.71
	Fusion Of Spine Bones For Correction Of Deformity, Anterior Approach, 4 To 7 Vertebral Segments	\$1,805.06
	Fusion Of Spine Bones For Correction Of Deformity, Anterior Approach, 8 Or More Vertebral Segments	\$1,978.63
	Fusion Of Spine Bones For Correction Of Hunchback Deformity, Single Or 2 Segments	\$1,929.36
	Fusion Of Spine Bones For Correction Of Hunchback Deformity, 3 Or More Segments	\$2,221.43
	Exploration Of Spinal Fusion	\$730.16
22836	·	\$1,453.65
22837	Tethering Of 8 Or More Middle Spine Bones	\$1,600.81
22838	Revision, Replacement, Or Removal Of Middle Spine Tethering	\$1,621.82
22840	Insertion Of Posterior Spinal Instrumentation At Base Of Neck For Stabilization, 1 Interspace	\$725.41
22841	Internal Spinal Fixation By Wiring Of Spinous Processes (List Separately In Addition To Code For Primary Procedure)	\$0.01
22842	Insertion Of Posterior Spinal Instrumentation For Spinal Stabilization, 3 To 6 Vertebral Segments	\$728.12
22843	Insertion Of Posterior Spinal Instrumentation For Spinal Stabilization, 7 To 12 Vertebral Segments	\$779.11
22844	Insertion Of Posterior Spinal Instrumentation For Spinal Stabilization, 13 Or More Vertebral Segments	\$948.90
22845	Insertion Of Anterior Spinal Instrumentation For Spinal Stabilization, 2 To 3 Vertebral Segments	\$692.22
22846	Insertion Of Anterior Spinal Instrumentation For Spinal Stabilization, 4 To 7 Vertebral Segments	\$719.55
22847	Insertion Of Anterior Spinal Instrumentation For Spinal Stabilization, 8 Or More Vertebral Segments	\$711.26
	Pelvic Fixation (Attachment Of Caudal End Of Instrumentation To Pelvic Bony Structures) Other Than Sacrum (List Separately In Addition To	
22848	Code For Primary Procedure)	\$346.26
22849	Reinsertion Of Spinal Fixation Device	\$1,087.64
22850	Removal Of Posterior Nonsegmental Spinal Instrumentation	\$655.66
22852	Removal Of Posterior Segmental Spinal Instrumentation	\$700.93
22853	Insertion Of Device Into Intervertebral Disc Space Of Spine And Fusion Of Vertebrae	\$246.15
	Insertion Of Device Into Gap Left By Removal Of Part Of Vertebra And Fusion Of Vertebrae	\$318.66
	Removal Of Anterior Instrumentation (Eg, Dwyer Device)	\$976.52
		\$1,585.21
	Insertion Of Artificial Lower Spine Disc, Anterior Approach	\$1,590.00
	Insertion Of Artificial Upper Spine Disc Anterior Approach	\$437.01
	Insertion Of Device Into Gap Left By Removal Of Part Of Vertebra	\$286.55
	Insertion Of Artificial Disc Between Bones Of Lower Spine, Additional Space	Price By Report
	The state of the s	y nopoli
	Revision With Replacement Of Artificial Upper Spine Disc	\$1,976.38
22861	Revision With Replacement Of Artificial Upper Spine Disc Revision With Replacement Of Artificial Lower Spine Disc	\$1,976.38 \$1,981.17
22861 22862	Revision With Replacement Of Artificial Lower Spine Disc	\$1,981.17
22861 22862 22864	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical	\$1,981.17 \$1,767.73
22861 22862 22864 22865	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar	\$1,981.17 \$1,767.73 \$1,934.92
22861 22862 22864 22865 22867	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06
22861 22862 22864 22865 22867 22868	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12
22861 22862 22864 22865 22867 22868 22869	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75
22861 22862 22864 22865 22867 22868 22869 22870	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34
22861 22862 22864 22865 22867 22868 22869 22870 22899	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report
22861 22862 22864 22865 22867 22868 22869 22870 22899 22900	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid)	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report
22861 22862 22864 22865 22867 22868 22869 22870 22899 22900 22901	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79
22861 22862 22864 22865 22867 22868 22870 22899 22900 22901 22902	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06
22861 22862 22864 22865 22867 22868 22869 22870 22899 22900 22901 22902 22903	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56
22861 22862 22864 22865 22867 22869 22870 22899 22900 22901 22902 22903 22904	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65
22861 22862 22864 22865 22867 22868 22870 22890 22900 22901 22902 22903 22904 22905	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65 \$943.67
22861 22862 22864 22865 22867 22869 22870 22890 22901 22902 22903 22904 22905 22999	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subclascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall Procedure On Abdomen, Muscle Or Bone	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65 \$943.67 \$1,183.57 Price By Report
22861 22862 22864 22865 22867 22869 22870 22900 22901 22902 22903 22904 22905 22909 22909 22909	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall Procedure On Abdomen, Muscle Or Bone Removal Of Calcium Deposits At Rotator Cuff Tendons, Open Procedure	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65 \$943.67 \$1,183.57 Price By Report
22861 22862 22864 22865 22867 22869 22870 22900 22901 22902 22903 22904 22905 22909 22909 22909 22900	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall Procedure On Abdomen, Muscle Or Bone Removal Of Calcium Deposits At Rotator Cuff Tendons, Open Procedure Capsular Contracture Release (Eg, Sever Type Procedure)	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65 \$943.67 \$1,183.57 Price By Report
22861 22862 22864 22865 22867 22868 22869 22890 22900 22901 22902 22903 22904 22905 22999 23000 23020 23030	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall Procedure On Abdomen, Muscle Or Bone Removal Of Calcium Deposits At Rotator Cuff Tendons, Open Procedure Capsular Contracture Release (Eg, Sever Type Procedure) Incision And Drainage; Deep Abscess Or Hematoma	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65 \$943.67 \$1,183.57 Price By Report
22861 22862 22864 22865 22867 22869 22870 22890 22900 22901 22902 22903 22904 22905 22909 23000 23030 23030	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall Procedure On Abdomen, Muscle Or Bone Removal Of Calcium Deposits At Rotator Cuff Tendons, Open Procedure Capsular Contracture Release (Eg, Sever Type Procedure) Incision And Drainage; Infected Bursa	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65 \$943.67 \$1,183.57 Price By Report \$547.08 \$632.33
22861 22862 22864 22865 22867 22869 22870 22899 22900 22901 22902 22903 22904 22905 22909 23000 23030 23030 23031 23035	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall Procedure On Abdomen, Muscle Or Bone Removal Of Calcium Deposits At Rotator Cuff Tendons, Open Procedure Capsular Contracture Release (Eg, Sever Type Procedure) Incision And Drainage; Deep Abscess Or Hematoma Incision, Bone Cortex (Eg, Osteomyelitis Or Bone Abscess), Shoulder Area	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65 \$943.67 \$1,183.57 Price By Report
22861 22862 22864 22865 22867 22869 22870 22899 22900 22901 22902 22903 22904 22905 22909 23000 23030 23030 23031 23035	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall Procedure On Abdomen, Muscle Or Bone Removal Of Calcium Deposits At Rotator Cuff Tendons, Open Procedure Capsular Contracture Release (Eg, Sever Type Procedure) Incision And Drainage; Infected Bursa	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65 \$943.67 \$1,183.57 Price By Report \$547.08 \$632.33 \$308.16
22861 22862 22864 22865 22867 22869 22870 22899 22900 22901 22903 22904 22905 22909 23030 23030 23031 23035 23040	Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall Procedure On Abdomen, Muscle Or Bone Removal Of Calcium Deposits At Rotator Cuff Tendons, Open Procedure Capsular Contracture Release (Eg, Sever Type Procedure) Incision And Drainage; Deep Abscess Or Hematoma Incision, Bone Cortex (Eg, Osteomyelitis Or Bone Abscess), Shoulder Area	\$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65 \$943.67 \$1,183.57 Price By Report \$547.08 \$632.33 \$308.16 \$406.42

Code	Description	Fee
	Biopsy Of Tissue Of Shoulder Area, Deep	\$534.99
23071	Biopsy, Soft Tissue Of Shoulder Area; 3 Cm Or Greater	\$442.03
	Biopsy, Soft Tissue Of Shoulder Area; 5 Cm Or Greater	\$630.33
	Excision, Tumor, Soft Tissue Of Shoulder Area, Subcutaneous; Less Than 3 Cm	\$362.19
	Excision, Tumor, Soft Tissue Of Shoulder Area, Subfascial (Eg, Intramuscular); Less Than 5 Cm Removal (Less Than 5 Centimeters) Tissue Growth Of Shoulder Area	\$494.76
	Removal (5 Centimeters) Tissue Growth Of Shoulder Area	\$1,008.82 \$1,280.51
	Arthrotomy, Glenohumeral Joint, Including Biopsy	\$467.13
	Incision To Repair Joints Between Shoulder, Chest And Collar Bones	\$421.52
	Arthrotomy; Glenohumeral Joint, With Synovectomy, With Or Without Biopsy	\$587.66
	Arthrotomy; Sternoclavicular Joint, With Synovectomy, With Or Without Biopsy	\$463.75
23107	Arthrotomy, Glenohumeral Joint, With Joint Exploration, With Or Without Removal Of Loose Or Foreign Body	\$605.90
	Claviculectomy; Partial	\$477.37
	Claviculectomy; Total	\$649.50
	Acromioplasty Or Acromionectomy, Partial, With Or Without Coracoacromial Ligament Release	\$632.18
23140	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Clavicle Or Scapula;	\$485.06
22115	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Clavicle Or Scapula; With Primary Autogenous Graft (Includes Obtaining Graft)	¢627.40
	Excision or Curettage of Bone Cyst or Benigh Tumor of Clavicle or Scapula; With Homogenous Or Other Nonautogenous Graft Excision or Curettage of Bone Cyst or Benigh Tumor of Clavicle or Scapula; With Homogenous Or Other Nonautogenous Graft	\$637.48 \$572.82
	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal Humerus;	\$611.23
20100	Exclusion of Culcutage of Sone Gyst of Sonigh Turner of Free mineral,	ψ011.20
23155	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal Humerus; With Primary Autogenous Graft (Includes Obtaining Graft)	\$729.40
	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal Humerus; With Homogenous Or Other Nonautogenous Graft	\$622.19
	Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess),	\$519.44
	Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess),	\$524.57
	Removal Of Dead Upper Arm Bone For Bone Infection In The Upper Portion Or The Bone	\$700.11
	Partial Removal Of Collar Bone For A Bone Infection	\$607.72
	Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg. Osteomyelitis), Scapula	\$617.35
	Partial Removal Of Upper Portion Upper Arm Bone (Humerus) For Bone Infection Ostectomy Of Scapula, Partial (Eg, Superior Medial Angle)	\$743.15 \$546.03
	Resection Humeral Head	\$755.35
	Radical Resection Of Tumor; Clavicle	\$1,356.86
	Radical Resection Of Tumor; Scapula	\$1,589.14
	Radical Resection Of Tumor, Proximal Humerus	\$1,742.46
23330	Removal Of Foreign Body Of Shoulder Joint, Accessed Beneath The Skin	\$288.29
	Removal Of Foreign Body Of Shoulder Joint, Accessed Beneath The Tissue Or Muscle	\$434.30
	Removal Of Prosthesis Of Shoulder	\$964.67
	Removal Of Prosthesis Of Shoulder, Total Shoulder	\$1,049.92
	Injection Procedure For Shoulder Arthrography Or Enhanced Ct/Mri Shoulder Arthrography	\$120.18
	Muscle Transfer, Any Type, Shoulder Or Upper Arm; Single	\$1,161.92
	Muscle Transfer, Any Type For Paralysis Of Shoulder Or Upper Arm; Multiple Scapulopexy (Eg, Sprengel'S Deformity Or For Paralysis)	\$1,030.58 \$884.57
	Tenotomy, Shoulder Area; Single Tendon	\$649.96
	Tenotomy, Shoulder Area: Multiple Tendons Through Same Incision	\$684.42
	Repair Of Torn Tendons Of Shoulder (Rotator Cuff), Open Procedure, Acute Or New	\$831.55
	Repair Of Torn Tendons Of Shoulder (Rotator Cuff), Open Procedure, Chronic Or Old	\$863.46
23415	Coracoacromial Ligament Release, With Or Without Acromioplasty	\$640.30
23420	Reconstruction Of Complete Shoulder (Rotator) Cuff Avulsion, Chronic (Includes Acromioplasty)	\$985.98
23430	Tenodesis Of Long Tendon Of Biceps	\$717.41
	Resection Or Transplantation Of Long Tendon Of Biceps	\$690.12
	Reattachment Of Shoulder Joint Capsule Without Bone Transfer	\$859.50
	Reattachment Of Shoulder Joint Capsule And Cartilage Without Bone Transfer With Repair Of Shoulder Rim	\$901.62
	Reattachment Of Shoulder Joint Capsule And Cartilage With Bone Block Reattachment Of Shoulder Joint Capsule With Bone Transfer (Coracoid Bone)	\$989.42
	Reattachment of Shoulder Joint Capsule With Borle Transfer (Coracold Borle) Repair Of Shoulder Joint Capsule In The Back Of The Joint	\$1,074.62 \$1,014.53
	Repair Of Shoulder Joint With Instability In Multiple Directions	\$1,014.53
	Arthroplasty, Glenohumeral Joint; Hemiarthroplasty	\$1,207.53
	Prosthetic Repair Of Shoulder Joint, Total Shoulder	\$1,452.13
	Revision Of Total Shoulder Arthroplasty, Including Allograft When Performed; Humeral Or Glenoid Component	\$1,616.06
	Revision Of Total Shoulder Repair, Total Shoulder	\$1,742.83
23480	Incision To Repair Collarbone	\$747.66
23485	Osteotomy, Clavicle, With Or Without Internal Fixation; With Bone Graft For Nonunion Or Malunion (Includes Obtaining Graft And/Or Necessary Fixation)	\$959.94
	Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methyl Methacrylate; Clavicle	\$783.80
	Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methylmethacrylate; Proximal Humerus	\$923.23
	Closed Treatment Of Clavicular Fracture; Without Manipulation	\$224.32
	Treatment Of Closed Clavicular Fracture; With Manipulation	\$337.72
	Open Treatment Of Clavicular Fracture, Includes Internal Fixation, When Performed	\$592.48
	Closed Treatment Of Sternoclavicular Dislocation; Without Manipulation Treatment Of Closed Sternoclavicular Dislocation; With Manipulation	\$227.49
	Treatment Of Closed Sternoclavicular Dislocation; With Manipulation	\$373.04
	Open Treatment Of Sternoclavicular Dislocation, Acute Or Chronic; Open Treatment Of Closed Or Open Sternoclavicular Dislocation, Acute Or Chronic; With Fascial Graft (Includes Obtaining Graft)	\$529.61 \$575.35
	Closed Treatment Of Acromicclavicular Dislocation; Without Manipulation	\$225.10
	Treatment Of Closed Acromioclavicular Dislocation; With Manipulation	\$330.41
	Open Treatment Of Acromioclavicular Dislocation, Acute Or Chronic;	\$585.39
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23552	Open Treatment Of Closed Or Open Acromioclavicular Dislocation, Acute Or Chronic; With Fascial Graft (Includes Obtaining Graft)	\$642.06

23570	Description	Fee
	Closed Treatment Of Scapular Fracture; Without Manipulation	\$168.39
20070	Global Tradition of Coopera Traditio, William Indiano	Ψ100.55
23575	Closed Treatment Of Scapular Fracture; With Manipulation, With Or Without Skeletal Traction (With Or Without Shoulder Joint Involvement)	\$385.20
	Open Treatment Of Scapular Fracture (Body, Glenoid Or Acromion) Includes Internal Fixation, When Performed	\$840.68
	Closed Treatment A Fracture Of The Upper End Of The Upper Arm Bone Without Manipulation	\$338.28
	Closed Treatment Of A Break Of The Upper Portion Of Upper Arm Bone With Manipulation	\$439.98
	Open Treatment Of Broken Upper Arm Bone, Upper End	\$799.43
	Open Treatment Of Proximal Humeral (Surgical Or Anatomical Neck) Fracture, Includes Internal Fixation, When Performed, Includes Repair Of	
23616	Tuberosity(S), When Performed; With Proximal Humeral Prosthetic Replacement	\$1,117.90
23620	Closed Treatment Of Greater Humeral Tuberosity Fracture; Without Manipulation	\$203.78
23625	Treatment Of Closed Greater Tuberosity Fracture; With Manipulation	\$360.43
23630	Open Treatment Of Greater Humeral Tuberosity Fracture, Includes Internal Fixation, When Performed	\$712.77
23650	Closed Treatment Of Shoulder Dislocation, With Manipulation; Without Anesthesia	\$295.01
23655	Treatment Of Closed Shoulder Dislocation, With Manipulation; Requiring Anesthesia	\$279.38
23660	Open Treatment Of Acute Shoulder Dislocation	\$537.56
23665	Closed Treatment Of Shoulder Dislocation, With Fracture Of Greater Humeral Tuberosity, With Manipulation	\$406.16
	Open Treatment Of Shoulder Dislocation And Broken Upper Arm Bone With A Fracture Of The Upper Arm Bone Boney Prominence Outside Of	
23670	The Joint	\$793.57
23675	Closed Treatment Of Shoulder Dislocation, With Surgical Or Anatomical Neck Fracture, With Manipulation	\$514.54
23680	Open Treatment Of Shoulder Dislocation And Broken Upper Arm Bone With A Fracture Of The Upper Arm Head Or Neck	\$844.16
23700	*Manipulation Under Anesthesia, Including Application Of Fixation Apparatus (Dislocation Excluded)	\$172.31
23800	Arthrodesis, Glenohumeral Joint;	\$932.95
23802	Arthrodesis, Glenohumeral Joint; With Autogenous Graft (Includes Obtaining Graft)	\$1,162.21
23900	Interthoracoscapular Amputation (Forequarter)	\$1,250.83
	Removal Of Tendons, Ligaments, And Muscles Of Shoulder	\$1,017.46
23921	Removal Of Tendons, Ligaments, And Muscles Of Shoulder, Secondary Closure	\$434.28
23929	Unlisted Procedure, Shoulder	Price By Report
23930	Incision And Drainage; Deep Abscess Or Hematoma	\$251.94
23931	Incision And Drainage, Upper Arm Or Elbow Area; Bursa	\$214.35
23935	Ncision, Deep, With Opening Of (Eg, Cortex For Osteomyelitis Or Bone Abscess);	\$470.72
	Incision Of Elbow With Exploration, Drainage, Or Removal Of Foreign Body	\$436.25
	Arthrotomy Of The Elbow, With Capsular Excision For Capsular Release (Separate Procedure)	\$673.09
	Biopsy Of Soft Tissue Of Upper Arm Or Elbow, Superficial	\$249.77
	Biopsy of Soft Tissue Of Upper Arm Or Elbow, Deep	\$584.82
	Biopsy, Soft Tissue Of Upper Arm Or Elbow Area; 3 Cm Or Greater	\$429.09
	Biopsy, Soft Tissue Of Upper Arm Or Elbow Area; 5 Cm Or Greater	\$736.94
	Excision, Tumor, Soft Tissue Of Upper Arm Or Elbow Area, Subcutaneous; Less Than 3 Cm	\$474.37
	Excision, Tumor, Soft Tissue Of Upper Arm Or Elbow Area, Subfascial (Eg, Intramuscular); Less Than 5 Cm	\$413.34
	Removal (Less Than 5 Centimeters) Tissue Growth Of Upper Arm Or Elbow	\$929.65
	Removal (5 Centimeters Or Greater) Tissue Growth Of Upper Arm Or Elbow	\$1,186.45
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	Arthrotomy, Elbow; With Synovial Biopsy Only Arthrotomy, Elbow; With Joint Evaluation, With Or Without Biopsy, With Or Without Bonoval Of Earnign Body	\$388.22
	Arthrotomy, Elbow; With Joint Exploration, With Or Without Biopsy, With Or Without Removal Of Foreign Body	\$466.13
	Arthrotomy, Elbow; With Synovectomy	\$569.32
	Excision, Olecranon Bursa	\$319.91
	Removal Of Upper Arm Bone Cyst Or Growth Without A Bone Graft	\$543.12
	Excision Or Curettage Of Bone Cyst Or Benign Tumor, Humerus; With Primary Autogenous Graft (Includes Obtaining Graft)	\$706.05
	Removal Of Upper Arm Bone Cyst Or Growth With A Bone Graft	
24120	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process;	\$783.27
	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Primary Autogenous Graft	\$783.27 \$491.90
	1	\$491.90
24125	(Includes Obtaining Graft)	
	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other	\$491.90 \$572.40
24126	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft	\$491.90 \$572.40 \$597.08
24126 24130	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head	\$491.90 \$572.40 \$597.08 \$471.69
24126 24130 24134	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24
24126 24130 24134 24136	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70
24126 24130 24134 24136 24138	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process;	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37
24126 24130 24134 24136 24138 24140	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88
24126 24130 24134 24136 24138 24140 24145	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Excision, Radial Head Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42
24126 24130 24134 24136 24138 24140 24145 24147	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42
24126 24130 24134 24136 24138 24140 24145 24147 24149	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42
24126 24130 24134 24136 24138 24140 24145 24147 24149	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62
24126 24130 24134 24136 24138 24140 24145 24147 24149 24150	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23
24126 24130 24134 24136 24138 24140 24145 24147 24149 24150 24152 24155	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure) Radical Resection Of Tumor, Shaft Or Distal Humerus Radical Resection Of Tumor, Radial Head Or Neck Resection Of Elbow Joint (Arthrectomy)	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14
24126 24130 24134 24136 24138 24140 24145 24147 24149 24150 24152 24155	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure) Radical Resection Of Tumor, Shaft Or Distal Humerus Radical Resection Of Tumor, Radial Head Or Neck	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61
24126 24130 24134 24136 24138 24140 24145 24147 24149 24150 24152 24155 24160	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure) Radical Resection Of Tumor, Shaft Or Distal Humerus Radical Resection Of Tumor, Radial Head Or Neck Resection Of Elbow Joint (Arthrectomy)	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85
24126 24130 24134 24136 24138 24140 24145 24147 24149 24150 24152 24160 24164	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure) Radical Resection Of Tumor, Shaft Or Distal Humerus Radical Resection Of Tumor, Radial Head Or Neck Resection Of Elbow Joint (Arthrectomy) Removal Of Elbow Joint Hardware	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85
24126 24130 24134 24136 24138 24140 24145 24147 24149 24150 24152 24160 24164 24200	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg. Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg. Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure) Radical Resection Of Tumor, Shaft Or Distal Humerus Radical Resection Of Tumor, Radial Head Or Neck Resection Of Elbow Joint (Arthrectomy) Removal Of Elbow Joint Hardware Removal Of Hardware Of Forearm Bone At Elbow Joint	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41
24126 24130 24134 24136 24138 24140 24145 24147 24149 24150 24152 24155 24160 24164 24200 24201	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg. Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg. Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure) Radical Resection Of Tumor, Shaft Or Distal Humerus Radical Resection Of Tumor, Radial Head Or Neck Resection Of Elbow Joint (Arthrectomy) Removal Of Elbow Joint (Arthrectomy) Removal Of Hardware Of Forearm Bone At Elbow Joint Removal Of Foreign Body Of Upper Arm Or Elbow Area, Accessed Beneath The Skin	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41 \$153.03
24126 24130 24134 24136 24138 24140 24145 24147 24149 24150 24152 24164 24200 24201 24220	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg., Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg., Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure) Radical Resection Of Tumor, Shaft Or Distal Humerus Radical Resection Of Tumor, Radial Head Or Neck Resection Of Elbow Joint (Arthrectomy) Removal Of Elbow Joint Hardware Removal Of Hardware Of Forearm Bone At Elbow Joint Removal Of Foreign Body Of Upper Arm Or Elbow Area, Accessed Beneath The Skin Removal Of Foreign Body, Upper Arm Or Elbow Area	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41 \$153.03 \$517.16
24126 24130 24134 24136 24138 24140 24145 24147 24149 24150 24152 24150 24164 24200 24201 24200 24300	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg. Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg. Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure) Radical Resection Of Tumor, Shaft Or Distal Humerus Radical Resection Of Tumor, Radial Head Or Neck Resection Of Elbow Joint (Arthrectomy) Removal Of Elbow Joint (Arthrectomy) Removal Of Foreign Body Of Upper Arm Or Elbow Area, Accessed Beneath The Skin Removal Of Foreign Body, Upper Arm Or Elbow Area Injection Procedure For Elbow Arthrography Manipulation, Elbow, Under Anesthesia	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41 \$153.03 \$517.16 \$137.94
24126 24130 24134 24136 24138 24140 24145 24147 24150 24152 24155 24160 24200 24201 24200 24201 24200 24300 24300	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure) Radical Resection Of Tumor, Shaft Or Distal Humerus Radical Resection Of Tumor, Radial Head Or Neck Resection Of Elbow Joint (Arthrectomy) Removal Of Elbow Joint (Arthrectomy) Removal Of Hardware Of Forearm Bone At Elbow Joint Removal Of Foreign Body Of Upper Arm Or Elbow Area Injection Procedure For Elbow Arm Or Elbow Area Injection Procedure For Elbow Arthrography Manipulation, Elbow, Under Anesthesia Muscle Or Tendon Transfer, Any Type, Single (Excluding 24330)	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41 \$153.03 \$517.16 \$137.94 \$395.68
24126 24130 24134 24136 24138 24140 24145 24147 24150 24155 24160 24164 24200 24201 24200 24301 24301 24305	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure) Radical Resection Of Tumor, Shaft Or Distal Humerus Radical Resection Of Elbow Joint (Arthrectomy) Removal Of Elbow Joint (Arthrectomy) Removal Of Elbow Joint Hardware Removal Of Foreign Body Of Upper Arm Or Elbow Area, Accessed Beneath The Skin Removal Of Foreign Body, Upper Arm Or Elbow Area Injection Procedure For Elbow Arthrography Manipulation, Elbow, Under Anesthesia Muscle Or Tendon Transfer, Any Type, Single (Excluding 24330) Tendon Lengthening, Upper Arm Or Elbow, Each Tendon	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41 \$153.03 \$517.16 \$137.94 \$395.68 \$685.94
24126 24130 24134 24136 24138 24140 24145 24147 24150 24155 24155 24160 24200 24201 24202 24300 24301 24305 24305 24310	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure) Radical Resection Of Tumor, Shaft Or Distal Humerus Radical Resection Of Tumor, Radial Head Or Neck Resection Of Elbow Joint (Arthrectomy) Removal Of Elbow Joint Hardware Removal Of Hardware Of Forearm Bone At Elbow Joint Removal Of Foreign Body Of Upper Arm Or Elbow Area, Accessed Beneath The Skin Removal Of Foreign Body, Upper Arm Or Elbow Area Injection Procedure For Elbow Arthrography Manipulation, Elbow, Under Anesthesia Muscle Or Tendon Transfer, Any Type, Single (Excluding 24330) Tendon Lengthening, Upper Arm Or Elbow, Each Tendon Incision Of Tendon Located From Elbow To Shoulder, Open Procedure	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41 \$153.03 \$517.16 \$137.94 \$395.68 \$685.94 \$427.02
24126 24130 24134 24136 24138 24140 24145 24147 24150 24152 24155 24160 24164 24200 24201 24202 24300 24301 24305 24310 24320	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure) Radical Resection Of Tumor, Shaft Or Distal Humerus Radical Resection Of Tumor, Radial Head Or Neck Resection Of Elbow Joint (Arthrectomy) Removal Of Elbow Joint Hardware Removal Of Hardware Of Forearm Bone At Elbow Joint Removal Of Foreign Body Of Upper Arm Or Elbow Area, Accessed Beneath The Skin Removal Of Foreign Body, Upper Arm Or Elbow Area Injection Procedure For Elbow Arthrography Manipulation, Elbow, Under Anesthesia Muscle Or Tendon Transfer, Any Type, Single (Excluding 24330) Tendon Lengthening, Upper Arm Or Elbow, Each Tendon Incision Of Tendon Located From Elbow To Shoulder, Open Procedure Tenoplasty, With Muscle Transfer, With Or Without Free Graft, Elbow To Shoulder, Single (Seddon-Brookes Type Procedure)	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41 \$153.03 \$517.16 \$137.94 \$395.68 \$685.94 \$427.02 \$417.10
24126 24130 24134 24136 24138 24140 24145 24147 24150 24152 24152 24155 24160 24164 24200 24201 24202 24300 24301 24305	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg., Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg., Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure) Radical Resection Of Tumor, Radial Head Or Neck Resection Of Elbow Joint (Arthrectomy) Removal Of Elbow Joint (Arthrectomy) Removal Of Elbow Joint Hardware Removal Of Foreign Body of Upper Arm Or Elbow Area, Accessed Beneath The Skin Removal Of Foreign Body, Upper Arm Or Elbow Area Injection Procedure For Elbow Arthrography Manipulation, Elbow, Under Anesthesia Muscle Or Tendon Transfer, Any Type, Single (Excluding 24330) Tendon Lengthening, Upper Arm Or Elbow, Each Tendon Incision Of Tendon Located From Elbow, To Shoulder, Open Procedure Tenoplasty, With Muscle Transfer, With Or Without Free Graft, Elbow To Shoulder, Single (Seddon-Brookes Type Procedure) Flexor-Plasty, Elbow, (Eg., Steindler Type Advancement);	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$7775.85 \$1,135.85 \$661.41 \$153.03 \$517.16 \$137.94 \$395.68 \$685.94 \$447.10 \$7712.07
24126 24130 24134 24136 24138 24140 24145 24147 24149 24150 24152 24155 24160 24164 24200 24201 24202 24300 24301 24305	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure) Radical Resection Of Tumor, Radial Head Or Neck Resection Of Tumor, Radial Head Or Neck Resection Of Elbow Joint (Arthrectomy) Removal Of Elbow Joint (Arthrectomy) Removal Of Hardware Of Forearm Bone At Elbow Joint Removal Of Horeign Body Of Upper Arm Or Elbow Area, Accessed Beneath The Skin Removal Of Foreign Body, Upper Arm Or Elbow Area Injection Procedure For Elbow Arthrography Manipulation, Elbow, Under Anesthesia Muscle Or Tendon Transfer, Any Type, Single (Excluding 24330) Tendon Lengthening, Upper Arm Or Elbow, Each Tendon Incision Of Tendon Located From Elbow To Shoulder, Open Procedure Tenoplasty, With Muscle Transfer, With Or Without Free Graft, Elbow To Shoulder, Single (Seddon-Brookes Type Procedure) Flexor-Plasty, Elbow, (Eg, Steindler Type Advancement); Relocation Of Forearm Tendons With Advancement Of The Extensor Tendons	\$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41 \$153.03 \$517.16 \$137.94 \$395.68 \$685.94 \$427.02 \$417.10 \$712.07 \$656.92
24126 24130 24134 24136 24138 24140 24145 24147 24149 24155 24155 24160 24200 24201 24200 24301 24305 24300 24301 24320 24331 24332	(Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg., Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg., Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure) Radical Resection Of Tumor, Radial Head Or Neck Resection Of Elbow Joint (Arthrectomy) Removal Of Elbow Joint (Arthrectomy) Removal Of Elbow Joint Hardware Removal Of Foreign Body of Upper Arm Or Elbow Area, Accessed Beneath The Skin Removal Of Foreign Body, Upper Arm Or Elbow Area Injection Procedure For Elbow Arthrography Manipulation, Elbow, Under Anesthesia Muscle Or Tendon Transfer, Any Type, Single (Excluding 24330) Tendon Lengthening, Upper Arm Or Elbow, Each Tendon Incision Of Tendon Located From Elbow, To Shoulder, Open Procedure Tenoplasty, With Muscle Transfer, With Or Without Free Graft, Elbow To Shoulder, Single (Seddon-Brookes Type Procedure) Flexor-Plasty, Elbow, (Eg., Steindler Type Advancement);	\$491.90 \$572.40 \$597.08 \$471.60 \$683.24 \$580.70 \$633.37 \$644.88 \$5546.42 \$580.60 \$1,189.23 \$1,392.14 \$1,212.67 \$775.88 \$1,135.88 \$661.47 \$153.00 \$517.16 \$137.94 \$395.66 \$685.94 \$427.02 \$4417.11 \$712.07

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24343 Repair OI Flugured Biospis OT Triceps Tendon, Disald, With Or, Without Tendon Graft 24344 Repair OI Ligament On The Quiside Off The Elbow With Local Tissue 24345 Repair OI Ligament On The Quiside Off The Elbow With Local Tissue 24346 Repair OI Ligament On The Unside Off The Elbow With Local Tissue 24346 Repair OI Ligament On The Inside Off The Elbow With Local Tissue 24346 Repair OI Ligament On The Inside Off The Elbow With Local Tissue 24347 Incision Of Tendon To Repair Elbow, John Anderson Tissue 24357 Incision Off Tendon To Repair Elbow, John Anderson Tissue 24357 Incision Off Tissue And/OF Bone At Elbow With Tradon Repair, Open Procedure 24358 Removal Of Tissue And/OF Bone At Elbow With Tradon Repair, Open Procedure 24359 Removal Of Tissue And/OF Bone At Elbow With Tradon Repair, Open Procedure 24350 Repair OI Elbow Joint With Interposition Of Tissue 24350 Repair OI Elbow Joint With And Implant And Florous Tissue Reconstruction 24363 Artiroplasty, Elbow, With Delat Humerus And Provins Ultrary Prov
23434 Repair Of Ligament On The Outside Of The Ebow With A Cred Tissue 5714 23434 Repair Of Ligament On The Unside Of The Ebow With A Tendon Graft 5898 23434 Repair Of Ligament On The Inside Of The Ebow With A Tendon Graft 5704 23436 Repair Of Ligament On The Inside Of The Ebow With A Tendon Graft 5706 23436 Repair Of Tissue And Of Bone At Ebow, Open Procedure 5808 23436 Removal Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23438 Removal Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23439 Removal Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23439 Removal Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23432 Repair Of Ebow John With Replacement Of The Endo Of The Upper Arm Bone At The Ebow 5808 23432 Repair Of Tissue Bone Repair (Anthroplasty), User Arm Of Everant Components 51,309 23430 Repair Of Tissue Bone Repair (Anthroplasty), Usper Arm Of Everant Components 51,309 23431 Revision Of Tissue Bow Repair (Anthroplasty), Usper Arm Of Everant Components 51,305 234410 Mulpibe Of Vibrounity (Anthroplasty), Usper Arm Of Everant Components 51,305 234410 Mulpibe Of Normaline Of Mulpiant (Anthroplasty), Usper Arm Of Everant Components 51,305 234410 Mulpibe Of Normaline Of Mulpiant (Anthroplasty), Usper Arm Of Everant Components 51,305 234410 Mulpibe Of Normaline Of Mulpiant (Anthroplasty), Usper Arm Of Everant Components 51,305 234410 Mulpibe Of Normaline Of Mulpiant (Anthroplasty), Usper Arm Of Everant Components 51,305 23441
23434 Repair Of Ligament On The Outside Of The Ebow With A Cred Tissue 5714 23434 Repair Of Ligament On The Unside Of The Ebow With A Tendon Graft 5898 23434 Repair Of Ligament On The Inside Of The Ebow With A Tendon Graft 5704 23436 Repair Of Ligament On The Inside Of The Ebow With A Tendon Graft 5706 23436 Repair Of Tissue And Of Bone At Ebow, Open Procedure 5808 23436 Removal Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23438 Removal Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23439 Removal Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23439 Removal Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure 5808 23432 Repair Of Ebow John With Replacement Of The Endo Of The Upper Arm Bone At The Ebow 5808 23432 Repair Of Tissue Bone Repair (Anthroplasty), User Arm Of Everant Components 51,309 23430 Repair Of Tissue Bone Repair (Anthroplasty), Usper Arm Of Everant Components 51,309 23431 Revision Of Tissue Bow Repair (Anthroplasty), Usper Arm Of Everant Components 51,305 234410 Mulpibe Of Vibrounity (Anthroplasty), Usper Arm Of Everant Components 51,305 234410 Mulpibe Of Normaline Of Mulpiant (Anthroplasty), Usper Arm Of Everant Components 51,305 234410 Mulpibe Of Normaline Of Mulpiant (Anthroplasty), Usper Arm Of Everant Components 51,305 234410 Mulpibe Of Normaline Of Mulpiant (Anthroplasty), Usper Arm Of Everant Components 51,305 234410 Mulpibe Of Normaline Of Mulpiant (Anthroplasty), Usper Arm Of Everant Components 51,305 23441
24346 Repair Of Ligament On The Inside Of The Ebow With Local Tissue 24346 Repair Of Ligament On The Inside Of The Ebow With Local Tissue 24346 Repair Of Ligament On The Inside Of The Ebow With Local Tissue 24367 Incision Of Tenden To Repair Ebow John, An Tenden Graft 24367 Incision Of Tenden To Repair Ebow John An Tenden Graft 24368 Removal Of Tissue And/OF Bone At Ebow Work The Ebow Open Procedure 24369 Removal Of Tissue And/OF Bone At Ebow With Tenden Repair, Open Procedure 24369 Repair Of Tissue And/OF Bone At Ebow With Tenden Repair, Open Procedure 24369 Repair Of Ebow Join With Interposition Of Tissue 24369 Repair Of Ebow Join With Interposition Of Tissue 24360 Repair Of Ebow Join With And Implant And Fibrous Tissue Reconstruction 24360 Repair Of Ebow Join With And Implant And Fibrous Tissue Reconstruction 24363 Anthropiatsy, Ebow; With Distal Humens And Proximal Ulanar Proximed Ulanar Proxi
24348 Rapair OT Ligament On The Inside Of The Elbow With A Tendon Graft \$1,005 24347 Insisten OT Flandran To Repair Ebow John, Accessed Through The Skin \$1,405 24348 Repair OT Flasure And OT In Inside Of The Elbow With A Tendon Repair, Open Procedure \$2526 24358 Removal OT Tissue And/OT Bone At Ebow, Open Procedure \$2526 24358 Removal OT Tissue And/OT Bone At Ebow, Open Procedure \$2526 24359 Repair OT Ebow Joint With Interposition OT Tissue \$2522 24361 Repair OT Ebow Joint With Interposition OT Tissue \$2522 24361 Repair OT Ebow Joint With And Implant And Florous Tissue Reconstruction \$2528 24362 Repair OT Ebow Joint With And Implant And Florous Tissue Reconstruction \$2528 24362 Repair OT Ebow Joint With And Implant And Florous Tissue Reconstruction \$2528 24365 Joint Repair (Antroplasty) Forearm Bone On The Thurnb Side (Radius) At The Ebow Without An Implant \$2527 24366 Joint Repair (Antroplasty) Forearm Bone On The Thurnb Side (Radius) At The Ebow Without And Implant \$2527 24370 Ravision OT Total Ebow Rapair (Antroplasty), Upper Arm Or Forearm Components \$1,309 24371 Ravision OT Total Ebow Rapair (Antroplasty), Upper Arm And Forearm Components \$1,309 24470 Distoction, Humanus, With Or Without Internal Fization \$1,505 24470 Distoction, Humanus, With Or Without Internal Fization \$1,505 24470 Distoction, Humanus, With Or Without Internal Fization \$1,505 24470 Distoction, Humanus, With Or Without Internal Fization \$1,505 24470 Distoction, Humanus, With Internal Fization \$1,005 24470 Distoction, Humanus, With Internal Fization, Humanus, With Internal Fization, With Or Without I
24346 Repair Of Ligament On The Inside Of The Elbow With A Tendon Graft 24357 Incision Of Tendon To Repair Elbow John, Accessed Through The Skin 3447 24358 Removal Of Tissue And/OF Bone At Elbow With Tendon Repair, Open Procedure 5865 24359 Removal Of Tissue And/OF Bone At Elbow With Tendon Repair, Open Procedure 5865 24359 Repair Of Elbow Joint With Interposition Of Tissue 5862 24359 Repair Of Elbow Joint With Replacement Of The Endo Of The Upper Arm Bone At The Elbow 5816 24352 Repair Of Elbow Joint With Replacement Of The Endo Of The Upper Arm Bone At The Elbow 5816 24352 Repair Of Elbow Joint With And Implant And Fibrous Tissue Reconstruction 5863 24356 Joint Repair (Arthroplasty) Forearm Bone On The Thurnb Side (Radius) At The Elbow With And Implant 58627 24356 Joint Repair (Arthroplasty) Forearm Bone On The Thurnb Side (Radius) At The Elbow With And Implant 58627 24356 Joint Repair (Arthroplasty) Forearm Bone On The Thurnb Side (Radius) At The Elbow With And Implant 58627 24356 Joint Repair (Arthroplasty) Loper Arm And Forearm Components 51,390 24430 24350 243
24358 [Romoval Of Tesudo n To Repair Elbow Joint, Accessed Through The Skin 24368 [Romoval Of Tissue And/OF Bone At Elbow, Open Procedure 24368 [Removal Of Tissue And/OF Bone At Elbow, Open Procedure 24368 [Repair Of Tebow Joint With Interposition Of Tissue 24368 [Repair Of Elbow Joint With Interposition Of Tissue 24368 [Repair Of Elbow Joint With Interposition Of Tissue 24368 [Repair Of Elbow Joint With Interposition Of Tissue 24368 [Repair Of Elbow Joint With And Implant And Fibrous Tissue Reconstruction 24368 [Joint Repair (Anthroplasty) Foream Bone On Tine Thurnh Side (Radius) Al The Elbow Without An Implant 24368 [Joint Repair (Anthroplasty) Foream Bone On Tine Thurnh Side (Radius) Al The Elbow Without An Implant 24368 [Joint Repair (Anthroplasty) Foream Bone On Tine Thurnh Side (Radius) Al The Elbow Without An Implant 24368 [Joint Repair (Anthroplasty) Foream Bone On Tine Thurnh Side (Radius) Al The Elbow Without And Implant 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Office Anthroperous Bone Graft (Induced Sobtaining Graft) 24370 [Revision Of Nonution Of National Anthroperous Repair (Anthroplasty), Upper Am Office Anthroperous Bone Graft (Induced Sobtaining Graf
24358 Removal Of Tissue And/Or Bone At Elbow, Open Procedure 24369 Removal Of Tissue And/Or Bone At Elbow (With Tendon Repair, Open Procedure) 24369 Repair Of Elbow, John With Interposition Of Tissue 24369 Repair Of Elbow, John With Interposition Of Tissue 24361 Repair Of Elbow, John With Replacement Of The Endo Of The Upper Arm Bone At The Elbow 24363 Repair Of Elbow, John With And Implant And Fibrous Tissue Reconstruction 24363 Indropalsy, Elbow, With Disbatt Humerus And Proximal Unary Prossitetic Replacement (Eg. Total Elbow) 24363 Alfropalsy, Elbow, With Disbatt Humerus And Proximal Unary Prossitetic Replacement (Eg. Total Elbow) 24363 Indropalsy, Elbow, With Disbatt Humerus And Proximal Unary Brosshetic Replacement (Eg. Total Elbow) 24366 Joint Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At The Ebow Without An Implant 24366 Joint Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At The Ebow Without An Implant 24366 Joint Repair (Arthroplasty), Upper Arm On Forearm Components 24377 Revision Of Total Ebow Repair (Arthroplasty), Upper Arm And Forearm Components 24378 Revision Of Total Ebow Repair (Arthroplasty), Upper Arm And Forearm Components 24470 Mittable Selection Resident Realignment On Intermedullary Red (Schield Type Procedure) 24470 Mittable Selection Resident Realignment On Intermedullary Red (Schield Type Procedure) 24430 Repair Of Nonunion Or Malunion, Humerus; Without Graft (Eg. Compression Technique, Etc) 24430 Repair Of Nonunion Or Malunion, Humerus; Without Graft (Eg. Compression Technique, Etc) 24430 Repair Of Nonunion Or Malunion, Humerus; Without Graft (Eg. Compression Technique, Etc) 24430 Repair Of Nonunion Or Malunion, Humerus; Without Graft (Eg. Compression Technique, Etc) 24430 Repair Of Nonunion Or Malunion, Humerus; Without Graft (Eg. Compression Technique, Etc) 24430 Repair Of Nonunion Or Malunion, Humerus; Without Manipulation 24430 Repair Of Nonunion Or Malunion, Humerus Practure, Without Methymerhacrylate, Humeral Shaft 24506 Closeed Treatment A Fact
24398 Removal Of Tissue And/Or Bone At Elbow With Tendon Repair, Open Procedure \$865
24368 Repair Of Elbow Joint With Interposition Of Tissue
24368 Repair Of Elbow Joint With Interposition Of Tissue
Ageair Of Eibow Joint With Replacement Of The Endo Of The Upper Arm Bone At The Eibow \$915 24968 Repair Of Eibow Joint With And Impliant And Fibrous Tissues Reconstruction \$963 24968 John Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At the Eibow Without An Implant \$587 24966 John Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At the Eibow With And Implant \$587 24966 John Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At the Eibow With And Implant \$587 24966 John Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At the Eibow With And Implant \$587 24967 Revision Of Total Eibow Repair (Arthroplasty), Upper Arm On Forearm Components \$1,598 24970 Revision Of Total Eibow Repair (Arthroplasty), Upper Arm On Forearm Components \$1,598 24970 Revision Of Total Eibow Repair (Arthroplasty), Upper Arm On Forearm Components \$1,598 24970 Revision Of Total Eibow Repair (Arthroplasty), Upper Arm On Forearm Components \$1,598 24970 Revision Of Total Eibow Repair (Arthroplasty), Upper Arm On Forearm Components \$1,598 24970 Revision Of Total Eibow Repair (Arthroplasty), Upper Arm On Forearm Components \$1,598 24970 Multiple Osteotomies With Realignment On Intramedullary Rod (Sofield Type Procedure) \$981 24970 Repair Of Noruminor Of Malurion, Humerus, Without Graft (Eg. Compression Technique, Etic) \$1,093 24970 Repair Of Noruminor Of Malurion, Humerus, With Ilica Of Other Arusgenous Bone Graft (Includes Obtaining Graft) \$1,093 24970 Hemiepiphyseal Arrest (Eg. Cubitus Varus Of Valgus, Distal Humerus) \$1,093 24970 Hemiepiphyseal Arrest (Eg. Cubitus Varus Of Valgus, Distal Humerus) \$1,093 24970 Hemiepiphyseal Arrest (Eg. Cubitus Varus Of Valgus, Distal Humerus) \$1,093 24970 Hemiepiphyseal Arrest (Eg. Cubitus Varus Of Valgus, Distal Humerus \$1,093 24970 Hemiepiphyseal Arrest (Eg. Cubitus Varus Of Valgus, Distal Humerus \$1,093 24970 Hemiepiphyseal Arrest (Eg. Cubitus Varus Of Valgus, Distal Humerus
24932 Repair Of Elbow Joint With And Implant And Fibrous Tissue Reconstruction \$963 24936 Althroplasty, Elbow With Distal Humens And Proximal Uniar Prosthetic Replacement (Eg., Total Elbow) \$1,308 24936 Joint Repair (Arthroplasty) Foream Bone On The Thumb Side (Radius) At The Elbow Without An Implant \$587 24936 Joint Repair (Arthroplasty) Foream Bone On The Thumb Side (Radius) At The Elbow With And Implant \$587 24936 Joint Repair (Arthroplasty) Foream Bone On The Thumb Side (Radius) At The Elbow With And Implant \$582 24370 Revision Of Total Elbow Repair (Arthroplasty), Upper Arm Or Foream Components \$1,398 24371 Revision Of Total Elbow Repair (Arthroplasty), Upper Arm And Foream Components \$1,398 24400 Detection, Humenus, With Or Without Internal Fixation \$1,398 24410 Detection, Humenus, With Or Without Internal Fixation \$3,598 24410 Detection with the Provision of the Provision Provision \$3,598 24420 Detections with Registration of Intramedullary Provision \$3,598 24420 Detections with Registration \$4,000 24420 Detections with Registration \$4,000 24420 Detections \$4,000 24420 Detections \$4,000 24420 Detections \$4,000 24420 Detections \$4,000 24430 Repair Of Norunion Or Malunion, Humerus, With lact Or Other Autogenous Bone Graft (Includes Obtaining Graft) \$1,005 24430 Repair Of Norunion Or Malunion, Humerus, With lact Or Other Autogenous Bone Graft (Includes Obtaining Graft) \$1,005 24430 Decompression Fasciotomy, Forearm, With Brachal Arthrop Exploration \$1,000 24430 Decompression Fasciotomy, Forearm, With Brachal Arthrop Exploration \$1,000 24430 Decompression Fasciotomy, Forearm, With Brachal Arthrop Exploration \$1,000 24430 Decompression Fasciotomy, Forearm, With Brachal Arthrop Exploration \$1,000 24430 Decompression Fasciotomy, Forearm, With Brachal Arthrop Exploration \$1,000 24430 Decompression Fasciotomy, Forearm, With Brachal Arthrop Library \$1,000 24430 Decompression Fasciotomy, Forearm, With Brachal Arthr
24363 Arthroplasty, Elbow With Distal Humerus And Proximal Ulnar Prosthetic Replacement (Eq. Total Elbow) \$1,308 24365 Joint Repair (Arthroplasty) Foream Bone on The Thumb Side (Radius) At The Ebow Without An Implant \$587 24365 Joint Repair (Arthroplasty) Foream Bone on The Thumb Side (Radius) At The Ebow With And Implant \$587 24370 Revision Of Total Ebow Repair (Arthroplasty), Upper Arm Or Forearm Components \$1,390 24371 Revision Of Total Ebow Repair (Arthroplasty), Upper Arm On Forearm Components \$1,595 24470 Obsteotomics Without Internal Fixation \$754 24471 Oll Mulpic Deteotomics Without Internal Fixation \$754 24420 Obsteotomics Without Internal Fixation \$754 24420 Osteotomics Without Internal Fixation \$754 24420 Osteotomics Without Internal Fixation \$754 24420 Repair Of Norminon Or Makinon, Humerus: Without Graft (Eg. Compression Technique, Etc) \$1,063 24430 Repair Of Norminon Or Makinon, Humerus: Without Graft (Eg. Compression Technique, Etc) \$1,062 24440 Mental Polyphyseal Arras (Eg. Cubitus Various Or Valgus), Distal Humerus \$616 24440 Mental Polyphyseal Arras (Eg. Cubitus Various Or Valgus), Distal Humerus \$572 24450 Decompression Fasciotomy, Forearm, With Brachial Artery Exploration \$573 24440 Hemile
24365 Joint Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At The Elbow Without An Implant \$5257 24366 Joint Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At The Elbow With And Implant \$5252 24370 Revision Of Total Elbow Repair (Arthroplasty). Upper Arm Or Forearm Components \$1,390 24371 Revision Of Total Elbow Repair (Arthroplasty). Upper Arm And Forearm Components \$1,390 244000 Osteotomy, Humerus, With Or Without Internal Fixation \$754 244100 Discotomies With Realignment On Intramedullary Rod (Sofield Type Procedure) \$981 24420 Steotomies With Realignment On Intramedullary Rod (Sofield Type Procedure) \$980 24430 Repair Of Norunico Or Malunion, Humerus; Without Graft (Eg. Compression Technique, Etc) \$1,065 24430 Repair Of Norunico Or Malunion, Humerus; Without Graft (Eg. Compression Technique, Etc) \$1,065 24437 Repair Of Norunico Or Malunion, Humerus; With Ilac Or Other Autogenous Bone Graft (Includes Obtaining Graft) \$1,093 24470 Hemiepiphyseal Arrest (Eg. Cublitus Varus Or Valgus, Distal Humerus) \$1,065 24439 Decompression Fasotiomy, Forearm, With Brachial Artery Exploration \$570 24498 Decompression Fasotiomy, Forearm, With Brachial Artery Exploration \$570 24498 Prophylactic Treatment (Nalling, Pinning, Plating Or Wiring), With Or Without Methylmethacylate, Humeral Shaft \$788 24500 Closed Treatment Of A Break Of The Mid Portion Of Upper Arm Bone With Manipulation \$3345 24501 Open Treatment Of Broken Upper Arm Bone, Mid-Pontion \$400 24502 Closed Treatment Of Broken Upper Arm Bone, Mid-Pontion \$400 24503 Closed Treatment Of Humeral Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; Without Manipulation \$400 24503 Without Shiro / Skeletal Traction \$400 24504 Closed Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar 24505 Closed Treatment Of Humeral
3436 Joint Repair (Anthroplasty) Forearm Bone On The Thumb Side (Radius) At The Elbow With And Implant \$325 34370 Revision Of Total Elbow Repair (Anthroplasty), Upper Arm Or Forearm Components \$1,399 34371 Revision Of Total Elbow Repair (Anthroplasty), Upper Arm Or Forearm Components \$1,585 34400 Steotomy, Humerus, With Or Without Internal Fixation \$525 34410 Multiple Osteotomies With Realignment On Intramedullary Rod (Sofield Type Procedure) 3981 34420 Osteoplasty, Humerus (Eg., Shortening Or Lengthening) 3981 34430 Repair Of Nonunion Or Malunion, Humerus, Withou Graft (Eg. Compression Technique, Etc) 3982 34430 Repair Of Nonunion Or Malunion, Humerus, Withou Graft (Eg. Compression Technique, Etc) 3982 34430 Repair Of Nonunion Or Malunion, Humerus, Withou Graft (Eg. Compression Technique, Etc) 3982 34440 Memberphyseal Arrest (Eg., Cubitus Varva Or Valgus, Distal Humerus) 34440 Memberphyseal Arrest (Eg., Cubitus Varva Or Valgus, Distal Humerus) 34440 Memberphyseal Arrest (Eg., Cubitus Varva Or Valgus, Distal Humerus) 34440 Memberphyseal Arrest (Radius) 34440 34440 Memberphyseal Arrest (Radius) 34440 Memberphyseal Arrest (Radius) 34440 Memberphyseal Arrest (Radius) 34440 34440 Memberphyseal Arrest (Radius) 34440 Memberphyseal Arrest (Radius) 34440 3
14370 Revision Of Total Ebow Repair (Arthroplasty), Upper Arm And Forearm Components \$1,390 24471 Revision Of Total Ebow Repair (Arthroplasty), Upper Arm And Forearm Components \$1,595 24400 Osteotomy, Humerus, With Or Without Internal Fixation \$754 24410 Osteotomies With Realignment On Intramedulary Rod (Scried Type Procedure) \$980 24420 Osteotomy, Humerus, With Or Without Internal Fixation \$981 24420 Osteotomies With Realignment On Intramedulary Rod (Scried Type Procedure) \$980 24430 Repair Of Norunison Or Malunion, Humerus, Without Graft (Eg. Compression Technique, Etc) \$1,065 24438 Repair Of Norunison Or Malunion, Humerus, Withi Iaco Cother Autogenous Bone Graft (Includes Obtaining Graft) \$1,093 24470 Hemiepiphyseal Arrest (Eg. Cublitus Varus Or Valgus, Distal Humerus) \$1,065 24439 Decompression Fasciotomy, Forearm, With Brachal Interfe Exploration \$570 24439 Prophylactic Treatment (Naling, Pinning, Pilating Or Wiring), With Or Without Methylmethacrylate, Humeral Shaft \$789 24450 Closed Treatment (Incline), Pinning, Pilating Or Wiring), With Or Without Methylmethacrylate, Humeral Shaft \$789 24500 Closed Treatment Of Broken Upper Arm Bone With Manipulation \$344 24505 Closed Treatment Of Broken Upper Arm Bone With Manipulation \$395 24515 Open Treatment Of Broken Upper Arm Bone Mith Manipulation \$395 24530 Closed Treatment Of Humeral Shaft Fracture, With Insertion Of Intramedullary Implant, With Or Without Intercondylar Extension; With Manipulation \$400 24536 Without Skin Or Skeletal Traction \$400 24536 Closed Treatment Of Humeral Epicondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar \$400 24536 Denor Treatment Of Humeral Epicondylar Fracture, Medial O
194311 Revision Of Total Ebow Repair (Anthroplasty), Upper Arm And Forearm Components \$1,595
194311 Revision Of Total Ebow Repair (Anthroplasty), Upper Arm And Forearm Components \$1,595
24410 Multiple Osteotomey, Humerus, With Or Without Internal Fixation \$754
Multiple Osteotomies With Realignment On Intramedullary Rod (Sofield Type Procedure) 5961
Sepair Of Nonunion Or Malunion, Humerus; Without Graft (Eg. Compression Technique, Etc) \$1,085
Repair Of Nonunion Or Malunion, Humerus; Without Graft (Eg. Compression Technique, Etc) 44435 Repair Of Nonunion Or Malunion, Humerus; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft) 5510
24470 Hemiepiphyseal Arrest (Eg. Cubitus Varus Or Valgus, Distal Humerus) \$1.033 24480 Decompression Fasciotomy, Forearm, With Brachial Artery Exploration \$570 24498 Decompression Fasciotomy, Forearm, With Brachial Artery Exploration \$570 24498 Decompression Fasciotomy, Forearm, With Brachial Artery Exploration \$572 24498 Decompression Fasciotomy, Forearm, With Brachial Artery Exploration \$578 24498 Decompression Fasciotomy, Forearm, With Brachial Artery Exploration \$578 24498 Decompression Fasciotomy, Forearm, With Brachial Artery Exploration \$580 24500 Closed Treatment (Naling, Pinning, Plating Or Wiring), With Or Without Methylimethacrylate, Humeral Shaft \$580 24500 Closed Treatment Of A Break Of The Mid Portion Of Upper Arm Bone With Manipulation \$582 24515 Open Treatment Of Storacondylar Or Transcondylar Plating 24515 Open Treatment Of Humeral Shaft Fracture, With Insertion Of Intramedullary Implant, With Or Without Cerclage And/Or Locking Screws \$673 24530 Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation With Or Supracondylar Or Transcondylar Fracture, With Or Without Intercondylar Extension; With Manipulation With Or Pathylar Or Pathylar Or Pathylar Or Pathylar Practure, Includes Internal Fixation, When Performed; Without Intercondylar Department Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar Supracondylar Practure, Medial Or Lateral; Without Manipulation \$5750 24566 Insertion Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$5862 24576 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or
24496 Decompression Fasciotomy, Forearm, With Brachial Artery Exploration \$570
24496 Decompression Fasciotomy, Forearm, With Brachial Artery Exploration \$570
24498 Decompression Fasciotomy, Forearm, With Brachial Artery Exploration \$570
24498 Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring), With Or Without Methylmethacrylate, Humeral Shaft 24505 Closed Treatment Of A Break Of The Mid Portion Of The Upper Arm Bone Without Manipulation \$395 24515 Open Treatment Of Broken Upper Arm Bone, Mid-Portion \$395 24515 Open Treatment Of Broken Upper Arm Bone, Mid-Portion \$873 24516 Treatment Of Humeral Shaft Fracture, With Insertion Of Intramedullary Implant, With Or Without Cerciage And/Or Locking Screws \$873 24516 Treatment Of Humeral Shaft Fracture, With Insertion Of Intramedullary Implant, With Or Without Cerciage And/Or Locking Screws \$873 24530 Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; Without Manipulation Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or 24535 Without Skin Or Skeletal Traction \$468 24538 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar 24545 Extension Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar 24566 (Sused Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$975 24560 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$251 24565 (Soed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Nuthout Manipulation \$390 24576 (Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Includes Internal Fixation, When Performed \$750 24576 (Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Includes Internal Fixation, When Performed \$390 24577 (Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Includes Internal Fixation, When Performed \$393 24579 (Open Treatment Of Humeral Condylar Fracture, Medial
24500 Closed Treatment A Fracture Of The Mid Portion Of The Upper Arm Bone Without Manipulation \$384 24505 Closed Treatment Of A Break Of The Mid Portion Of Upper Arm Bone With Manipulation \$387 24516 Open Treatment Of Broken Upper Arm Bone, Mid-Portion \$873 24516 Treatment Of Humeral Shaft Fracture, With Insertion Of Intramedullary Implant, With Or Without Cerclage And/Or Locking Screws \$873 24516 Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; Without Manipulation \$400 Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or 24535 Without Skin Or Skeletal Traction \$488 24538 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin \$488 24538 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin \$488 24546 Extension \$488 2
24505 Closed Treatment Of A Break Of The Mid Portion Of Upper Arm Bone With Manipulation 24515 Open Treatment Of Broken Upper Arm Bone, Mid-Portion 24516 Treatment Of Humeral Shaft Fracture, With Insertion Of Intramedullary Implant, With Or Without Cerclage And/Or Locking Screws 8873 24500 Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; Without Manipulation Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or 24535 Without Skin Or Skeletal Traction S488 24538 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar Extension Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar Extension Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation S206 24566 Extension S216 24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation S237 24565 Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; With Manipulation S2466 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin S662 24576 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Includes Internal Fixation, When Performed S750 24576 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Includes Internal Fixation, When Performed S750 S2476 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Includes Internal Fixation, When Performed S750 S2476 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Includes Internal Fixation, When Performed S750 S2476 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; With Manipulation S24876 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; With Man
24515 Open Treatment Of Broken Upper Arm Bone, Mid-Portion 24516 Treatment Of Humeral Shaft Fracture, With Insertion Of Intramedullary Implant, With Or Without Cerclage And/Or Locking Screws 8873 24530 Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; Without Manipulation Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or 24535 Without Skin Or Sketleal Traction 3488 24538 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar 24545 Extension Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar 24546 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation 3506 24560 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Without Manipulation 3506 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed 3750 3750 3750 3750 3750 3750 3750 3750
24516 Treatment Of Humeral Shaft Fracture, With Insertion Of Intramedullary Implant, With Or Without Cerclage And/Or Locking Screws 24530 Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; Without Manipulation Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or Without Skin Or Skeletal Traction Without Skin Or Skeletal Traction S468 24538 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar Extension Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar 24546 Extension Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation 42565 Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation 52662 24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation 52662 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation 52466 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation 52476 (Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation 524877 Treatment Of Closed Condylar Fracture, Medial Or Lateral; Without Manipulation 524882 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation 524892 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin 524893 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow 524893 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin 5256 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant 52603 Treatment Of Closed Elbow Disloc
24530 Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; Without Manipulation \$400 Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or Without Skin Or Skeletal Traction \$468 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin Or Skeletal Traction \$811 Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar Extension Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar \$870 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$923 Open Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation \$506 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$662 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$662 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation, When Performed \$750 Open Treatment Of Closed Condylar Fracture, Medial Or Lateral; Without Manipulation, When Performed \$750 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$3294 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$3294 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$324 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$324 Insertion Of Hardware To Broken Dupper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$3260 Open Treatment Of Homeral Condylar Fracture, Medial Or Lateral; Without Anaipulation, Accessed Through The Skin \$3260 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$
Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; Without Manipulation Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or Without Skin Or Skeletal Traction \$468 24535 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar \$870 Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar \$870 Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar \$870 24566 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; With Manipulation \$231 24565 Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation \$24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$24576 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; Without Manipulation \$24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$24580 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; With Manipulation \$24580 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Includes Internal Fixation, When Performed \$3775 24581 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$3870 \$3
Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or 24535 Without Skin Or Skeletal Traction 24548 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar Extension Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar Extension Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$975 24566 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$266 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$662 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation, When Performed \$750 24576 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; Without Manipulation \$24577 Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$24577 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$24578 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$3399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$775 24586 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$987 24690 Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$987 24690 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$988 24690 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$988 24690 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$989 24691 Open Treatment Of Monteggia Type Of
Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or 24535 Without Skin Or Skeletal Traction 24548 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar Extension Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar Extension Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$975 24566 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$266 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$662 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation, When Performed \$750 24576 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; Without Manipulation \$24577 Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$24577 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$24578 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$3399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$775 24586 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$987 24690 Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$987 24690 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$988 24690 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$988 24690 Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocatio
24535 Without Skin Or Skeletal Traction \$468
Same
Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar Stression Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar Systemsion Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$231 24565 Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation \$506 24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$662 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$750 24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$399 24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral, Without Manipulation \$399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$375 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$612 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow \$1,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow \$1,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$987 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$256 24615 Open Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$326 24615 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed
24545 Extension Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar 24546 Extension 24546 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation 24565 Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation 24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation, When Performed 24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation 24577 Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; With Manipulation 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; With Manipulation 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin 24588 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow 31,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia 24606 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed 24608 Includes Internal Fixation, When Performed 25609
Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar 24566 Extension \$975 24560 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$231 24565 Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation \$506 24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$662 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$750 24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Without Manipulation \$244 24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral, With Manipulation \$399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$399 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$612 24588 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow \$1,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$3987 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$256 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$256 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation \$766 Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689
Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar \$975 24560 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$231 24565 Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation \$506 24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$662 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$750 24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Without Manipulation \$244 24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral, Without Manipulation \$3399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$3775 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$612 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow \$1,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$987 24600 Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$987 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$256 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$256 24605 Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689
24546 Extension \$975 24560 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$231 24565 Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation \$506 24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$622 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$750 24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$244 24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; With Manipulation \$399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$775 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$612 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow \$1,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$3987 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$256 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$326 24615 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689
24560 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$231 24565 Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation \$506 24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$662 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$750 24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$399 24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral, With Manipulation \$399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$775 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$612 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow \$1,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$987 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$256 24605 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$226 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation Closed Treatment Of Acute Or Chronic Elbow Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689
Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation 24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed 24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation 24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; With Manipulation 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed 24580 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin 24581 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia 24606 Open Treatment Of Acute Or Chronic Elbow Dislocation Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With 24620 Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), 8439 Includes Internal Fixation, When Performed S506
24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$662
24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$750 24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$244 24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; With Manipulation \$399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$775 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$612 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow \$1,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$987 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$256 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$326 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689
24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$349 24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; With Manipulation \$399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$775 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$612 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow \$1,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$987 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$256 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$326 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689
24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; With Manipulation 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed 2575 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With 24620 Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689
24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With 24620 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), 3439 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), 3439 Includes Internal Fixation, When Performed 3589
24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With 24620 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), 3439 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), 3439 Includes Internal Fixation, When Performed 3589
24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$612
24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With 24620 Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689
24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With 24620 Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), [S439 Includes Internal Fixation, When Performed] S689
24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$256 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$326 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Uppen Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689
Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$326 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation \$766 Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With 44620 Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689
24615 Open Treatment Of Acute Or Chronic Elbow Dislocation Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), 24635 Includes Internal Fixation, When Performed \$689
Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With 439 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689
Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With 439 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689
24620 Manipulation \$439 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), 24635 Includes Internal Fixation, When Performed \$689
Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), 24635 Includes Internal Fixation, When Performed \$\$89
24635 Includes Internal Fixation, When Performed \$689
24640 Uclosed Treatment Of Dislocated Forearm Bone Of Elbow, Child \$110
24650 Closed Treatment Of Radial Head Or Neck Fracture; Without Manipulation \$253
24655 Closed Treatment Of Broken Forearm (Radius) Bone At The Elbow Area On The Outside Part Of The Arm With Manipulation \$308
24665 Open Treatment Of The Forearm Bone On The Thumb Side Of The Forearm (Radius Bone) In The Elbow Region \$630
Open Treatment Of Radial Head Or Neck Fracture, Includes Internal Fixation Or Radial Head Excision, When Performed; With Radial Head
24666 Prosthetic Replacement \$745
24670 Closed Treatment Of Ulnar Fracture, Proximal End (Eg, Olecranon Or Coronoid Process[Es]); Without Manipulation \$203
24675 Closed Treatment Of Broken Forearm (Ulna)Bone At The Elbow Area On The Inside Or Back Part Of The Arm With Manipulation \$435
24685 Open Treatment Of The Forearm Bone On The Small Finger Side Of The Forearm (Ulna Bone) In The Elbow Region \$690
24800 Fusion Of Elbow Joint Without Bone Graft From The Patient \$761
24802 Fusion Of Elbow Joint With Bone Graft From The Patient \$911
24900 Amputation, Arm Through Humerus; With Primary Closure \$703
24900Amputation, Arm Through Humerus; With Primary Closure\$70324920Amputation At Upper Arm Bone, Open Procedure\$669
24900Amputation, Arm Through Humerus; With Primary Closure\$70324920Amputation At Upper Arm Bone, Open Procedure\$66924925Amputation, Arm Through Humerus; Secondary Closure Or Scar Revision\$539
24900Amputation, Arm Through Humerus; With Primary Closure\$70324920Amputation At Upper Arm Bone, Open Procedure\$66924925Amputation, Arm Through Humerus; Secondary Closure Or Scar Revision\$53924930Amputation, Arm Through Humerus; Reamputation\$740
24900Amputation, Arm Through Humerus; With Primary Closure\$70324920Amputation At Upper Arm Bone, Open Procedure\$66924925Amputation, Arm Through Humerus; Secondary Closure Or Scar Revision\$539
24900Amputation, Arm Through Humerus; With Primary Closure\$70324920Amputation At Upper Arm Bone, Open Procedure\$66924925Amputation, Arm Through Humerus; Secondary Closure Or Scar Revision\$53924930Amputation, Arm Through Humerus; Reamputation\$740
24900Amputation, Arm Through Humerus; With Primary Closure\$70324920Amputation At Upper Arm Bone, Open Procedure\$66924925Amputation, Arm Through Humerus; Secondary Closure Or Scar Revision\$53924930Amputation, Arm Through Humerus; Reamputation\$74024931Amputation, Arm Through Humerus; With Implant\$84524935Stump Elongation\$1,120
24900Amputation, Arm Through Humerus; With Primary Closure\$70324920Amputation At Upper Arm Bone, Open Procedure\$66924925Amputation, Arm Through Humerus; Secondary Closure Or Scar Revision\$53924930Amputation, Arm Through Humerus; Reamputation\$74024931Amputation, Arm Through Humerus; With Implant\$84524935Stump Elongation\$1,12024940Cineplasty, Upper Extremity, Complete Procedure\$1,567
24900 Amputation, Arm Through Humerus; With Primary Closure \$703 24920 Amputation At Upper Arm Bone, Open Procedure \$669 24925 Amputation, Arm Through Humerus; Secondary Closure Or Scar Revision \$539 24930 Amputation, Arm Through Humerus; Reamputation \$740 24931 Amputation, Arm Through Humerus; With Implant \$845 24935 Stump Elongation \$1,120 24940 Cineplasty, Upper Extremity, Complete Procedure \$1,567 24999 Unlisted Procedure, Humerus Or Elbow Price By Rep
24900Amputation, Arm Through Humerus; With Primary Closure\$70324920Amputation At Upper Arm Bone, Open Procedure\$66924925Amputation, Arm Through Humerus; Secondary Closure Or Scar Revision\$53924930Amputation, Arm Through Humerus; Reamputation\$74024931Amputation, Arm Through Humerus; With Implant\$84524935Stump Elongation\$1,12024940Cineplasty, Upper Extremity, Complete Procedure\$1,567

	Description	Fee
	Description Incision Of Tissue Of Forearm And/Or Wrist Muscle Compartment On One Side Of The Forearm To Relieve Pressure, Without Removal Of	ree
25020	·	\$522.93
		·
	Incision Of Tissue Of Forearm And/Or Wrist Muscle Compartment On One Side Of The Forearm To Relieve Pressure, With Removal Of Tissue	\$1,149.74
	Incision Of Tissue Of Forearm And/Or Wrist Muscle Compartment On Both Sides Of The Forearm To Relieve Pressure, Without Removal Of	
25024		\$714.99
	Incision Of Tissue Of Forearm And/Or Wrist Muscle Compartment On Both Sides Of The Forearm To Relieve Pressure, With Removal Of	0.4.000.07
25025		\$1,068.67
	Incision And Drainage; Deep Abscess Or Hematoma	\$490.47
	Incision And Drainage, Forearm And/Or Wrist; Bursa Incision, Deep, Bone Cortex, Forearm And/Or Wrist (Eg, Osteomyelitis Or Bone Abscess)	\$341.70 \$557.62
	Arthrotomy, Radiocarpal Or Midcarpal Joint, With Exploration, Drainage, Or Removal Of Foreign Body	\$521.46
	Biopsy Of Tissue Of Forearm And/Or Wrist, Superficial	\$246.49
	Biopsy Of Tissue Of Forearm And/Or Wrist, Deep	\$338.96
	Biopsy, Soft Tissue Of Forearm And/Or Wrist; 3 Cm Or Greater	\$449.83
	Biopsy, Soft Tissue Of Forearm And/Or Wrist; 3 Cm Or Greater	\$490.63
	Excision, Tumor, Soft Tissue Of Forearm And/Or Wrist Area, Subcutaneous; Less Than 3 Cm	\$365.75
	Excision, Tumor, Soft Tissue Of Forearm And/Or Wrist Area, Subfascial (Eg, Intramuscular); Less Than 3 Cm	\$476.07
	Removal (Less Than 3 Centimeters) Tissue Growth At Forearm And/Or Wrist	\$806.94
	Removal (3 Centimeters Or Greater) Tissue Growth At Forearm And/Or Wrist	\$1,044.87
	Incision To Repair Or Release Wrist Joint Covering	\$413.14
	Arthrotomy, Wrist Joint; With Biopsy	\$325.12
	Arthrotomy, Wrist Joint; With Joint Exploration, With Or Without Biopsy, With Or Without Removal Of Foreign Body	\$417.73
	Incision Into Wrist Joint With Removal Of Joint Lining Tissue	\$450.92
25107	Arthrotomy, Distal Radioulnar Joint Including Repair Of Triangular Cartilage, Complex	\$542.86
25109	Excision Of Tendon, Forearm And/Or Wrist, Flexor Or Extensor, Each	\$494.82
25110	Excision, Lesion Of Tendon Sheath	\$373.82
25111 F	Removal Of Cyst At Wrist, Initial Or Primary	\$336.07
	Removal Of Cyst At Wrist, Recurrent	\$399.17
	Removal Of Fluid-Filled Sac (Bursa) Of Wrist Joint Lining Or Forearm Tendon, On The Under Side Of The Wrist (Flexor Tendons)	\$660.51
	Removal Of Fluid-Filled Sac (Bursa) Of Wrist Joint Lining Or Forearm Tendon, On The Top Side Of The Wrist Extensor Tendons)	\$557.12
25118	Synovectomy, Extensor Tendon Sheath, Wrist, Single Compartment;	\$395.40
25119 I	Removal Of Lining Of Tendon Covering Of Wrist With Removal Of The End Of The Forearm Bone On The Small Finger Side Of The Wrist	\$463.86
25120	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Radius Or Ulna (Excluding Head Or Neck Of Radius And Olecranon Process);	\$515.96
	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Radius Or Ulna (Excluding Head Or Neck Of Radius And Olecranon Process); With	Ψοισίου
	Primary Autogenous Graft (Includes Obtaining Graft)	\$547.93
	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Radius Or Ulna (Excluding Head Or Neck Of Radius And Olecranon Process); With	•
25126 l	Homogenous Or Other Nonautogenous Graft	\$551.54
25130 F	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Carpal Bones;	\$419.36
25125	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Carpal Bones; With Primary Autogenous Graft (Includes Obtaining Graft)	¢£47.00
	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Carpal Bones; With Homogenous Or Other Nonautogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Carpal Bones; With Homogenous Or Other Nonautogenous Graft	\$517.02 \$444.78
	Sequestrectomy (Eq. For Osteomyelitis Or Bone Abscess);	\$480.89
	Partial Removal Of Forearm Bone On The Small Finger Side For Bone Infection	\$523.45
	Partial Removal Of Forearm Bone On The Thumb Side For Bone Infection	\$538.62
	Radical Resection Of Tumor, Radius Or Ulna	\$1,324.01
	Removal Of Wrist Bone, One Wrist Bone Not Specified	\$443.11
	Carpectomy; All Bones Or Proximal Row	\$570.69
	Radial Styloidectomy (Separate Procedure)	\$401.38
25240	Partial Removal Of The Forearm Bone On The Small Finger Side At The Wrist Area	\$398.33
25246 I	Injection Procedure For Wrist Arthrography	\$142.25
	Exploration With Removal Of Deep Foreign Body, Forearm Or Wrist	\$363.72
	Removal Of Wrist Prosthesis, Simple	\$492.37
	Removal Of Wrist Prosthesis, Complicated	\$658.23
	Manipulation, Wrist, Under Anesthesia	\$397.81
	Repair Of Tendon Or Muscle Of Forearm And/Or Wrist, Primary	\$572.10
	Repair Of Tendon Or Muscle Of Forearm And/Or Wrist, Secondary	\$584.16
	Repair Of Forearm And/Or Wrist Tendon Or Muscle On The Underside Of The Wrist (Flexor) With Graft	\$690.01
	Removal Of Upper Arm Bone Cyst Or Growth	\$384.80
	Repair Of Forearm And/Or Wrist Tendon Or Muscle On The Top Of The Wrist (Extensor), Secondary	\$515.52
	Repair Of Forearm And/Or Wrist Tendon Or Muscle On The Top Of The Wrist (Extensor) With Graft Repair, Tendon Sheath, Extensor, Forearm And/Or Wrist, With Free Graft (Includes Obtaining Graft) (Eg, For Extensor Carpi Ulnaris	\$611.95
	Subluxation)	\$618.51
25275	engthening Or Shortening Of Flexor Or Extensor Tendon, Single, Each Tendon	
25275 S 25280 L	Lengthening Or Shortening Of Flexor Or Extensor Tendon, Single, Each Tendon Incision Of Tendon Of Forearm And/Or Wrist. Open Procedure	\$522.88 \$318.19
25275 S 25280 L 25290 I	Incision Of Tendon Of Forearm And/Or Wrist, Open Procedure	\$318.19
25275 S 25280 L 25290 I 25295	Incision Of Tendon Of Forearm And/Or Wrist, Open Procedure Tenolysis, Single Flexor Or Extensor Tendon, Each Tendon	\$318.19 \$395.23
25275 \$ 25280 L 25290 L 25295 7 25300 A	Incision Of Tendon Of Forearm And/Or Wrist, Open Procedure	\$318.19 \$395.23 \$634.05
25275 \$ 25280 L 25290 L 25295 7 25300 A 25301 A	Incision Of Tendon Of Forearm And/Or Wrist, Open Procedure Tenolysis, Single Flexor Or Extensor Tendon, Each Tendon Anchoring Of Flexing Tendon Of Fingers To Wrist Bone	\$318.19 \$395.23
25275 \$ 25280 L 25290 L 25295 7 25300 / 25301 / 25310 7	Incision Of Tendon Of Forearm And/Or Wrist, Open Procedure Tenolysis, Single Flexor Or Extensor Tendon, Each Tendon Anchoring Of Flexing Tendon Of Fingers To Wrist Bone Anchoring Of Extending Tendon Of Fingers To Wrist Bone	\$318.19 \$395.23 \$634.05 \$591.77 \$636.02
25275 \$ 25280 \$\text{L}\$ 25290 \$\text{T}\$ 25295 \$\text{T}\$ 25300 \$\text{A}\$ 25310 \$\text{T}\$ 25312 \$\text{T}\$	Incision Of Tendon Of Forearm And/Or Wrist, Open Procedure Tenolysis, Single Flexor Or Extensor Tendon, Each Tendon Anchoring Of Flexing Tendon Of Fingers To Wrist Bone Anchoring Of Extending Tendon Of Fingers To Wrist Bone Tendon Transplantation Or Transfer, Flexor Or Extensor, Single; Each Tendon	\$318.19 \$395.23 \$634.05 \$591.77
25275 \$ 25280 \$\text{L}\$ 25290 \$\text{T}\$ 25295 \$\text{T}\$ 25300 \$\text{\$\sigma}\$ 25310 \$\text{T}\$ 25315 \$\text{F}\$	Incision Of Tendon Of Forearm And/Or Wrist, Open Procedure Tenolysis, Single Flexor Or Extensor Tendon, Each Tendon Anchoring Of Flexing Tendon Of Fingers To Wrist Bone Anchoring Of Extending Tendon Of Fingers To Wrist Bone Tendon Transplantation Or Transfer, Flexor Or Extensor, Single; Each Tendon Tendon Transplantation Or Transfer, Flexor Or Extensor, Single; With Tendon Graft(S) (Includes Obtaining Graft), Each Tendon	\$318.19 \$395.23 \$634.05 \$591.77 \$636.02 \$656.95 \$702.89
25275 \$ 25280 L 25290 7 25295 7 25300 7 25310 7 25312 7 25316 6	Incision Of Tendon Of Forearm And/Or Wrist, Open Procedure Tenolysis, Single Flexor Or Extensor Tendon, Each Tendon Anchoring Of Flexing Tendon Of Fingers To Wrist Bone Anchoring Of Extending Tendon Of Fingers To Wrist Bone Tendon Transplantation Or Transfer, Flexor Or Extensor, Single; Each Tendon Tendon Transplantation Or Transfer, Flexor Or Extensor, Single; With Tendon Graft(S) (Includes Obtaining Graft), Each Tendon Flexor Origin Slide (Eg, For Cerebral Palsy, Volkmann Contracture), Forearm And/Or Wrist;	\$318.19 \$395.23 \$634.05 \$591.77 \$636.02 \$656.95

Code	Description	Fee
25335	Transposition And Realignment Of Hand Over Ulna With Or Without Removal Of Bone Or Bones, And With Or Without Tendon Transfer Or Advancement (Riordon Type Operation)	\$860.23
	Reconstruction For Stabilization Of Unstable Distal Ulna Or Distal Radioulnar Joint, Secondary By Soft Tissue Stabilization (Eg, Tendon Transfer, Tendon Graft Or Weave, Or Tenodesis) With Or Without Open Reduction Of Distal Radioulnar Joint	\$813.41
	Incision Or Wedge Of Forearm Bone (Radius) On The Thumb Side Of The Forearm Towards The Wrist Area	\$620.37
	Incision Or Wedge Of Forearm Bone (Radius) On The Thumb Side Of The Forearm In The Mid Forearm Region	\$699.28
	Incision Or Wedge Of Forearm Bone (Ulna) On The Small Finger Side Of The Forearm	\$602.81
	Incision Or Wedge Of Both Forearm Bones (Ulna And Radius)	\$928.84
	Incisions Or Wedges Of One Or Both Forearm Bones (Ulna And Radius) With Insertion Of A Rod Inside The Bone	\$922.54
	Multiple Osteotomies. With Realignment On Intramedullary Rod (Sofield Type Procedure); Radius And Ulna	\$868.64
	Osteoplasty, Radius Or Ulna; Shortening	\$795.47
	Osteoplasty, Radius Or Ulna; Lengthening With Autogenous Bone Graft Osteoplasty, Radius Or Ulna; Lengthening With Autogenous Bone Graft Osteoplasty, Radius Or Ulna; Lengthening With Autogenous Bone Graft	\$905.99
	Osteoplasty, Radius And Ulna; Shortening	\$921.61
	Osteoplasty, Radius And Ulna; Lengthening With Autogenous Bone Graft	\$1,023.82
	Osteoplasty, Carpal Bone, Shortening	\$797.07
	Repair Of Nonunion Or Malunion, Radius Or Ulna; Without Graft (Eg, Compression Technique, Etc)	\$815.50
	Repair Of Nonunion Or Malunion, Radius Or Ulna; With Autograft (Includes Obtaining Graft)	\$945.86
	Repair Of Nonunion Or Malunion, Radius And Ulna; Without Graft (Eg, Compression Technique, Etc)	\$881.31
	Repair Of Norunion Or Malunion, Radius And Ulna; With Autograft (Includes Obtaining Graft)	\$1,057.33
	Repair Of Northinon of Matchion, Nacious And Offia, With Autogrant (modules obtaining Grant) Repair Of Defect With Autogenous Bone Graft; Radius Or Ulna	\$877.59
	Repair Of Defect With Autogenous Bone Graft; Radius And Ulna	\$1,018.25
	Insertion Of Vascular Pedicle Into Carpal Bone (Eg., Harii Procedure)	\$669.99
	Repair Of Non-Healed Wrist Bone Other Than (Scaphoid Or Navicular)	\$719.26
	Repair Of Non-Healed Wrist Bone, Scaphoid Or Navicular At The Base Of The Thumb Arthroplasty Or Replacement Of The End Of The Engagement On The Thumb Side At The Wrist Level	\$808.25
	Arthroplasty Or Replacement Of The End Of The Forearm Bone On The Thumb Side At The Wrist Level	\$854.44
	Arthroplasty Or Replacement Of The End Of The Forearm Bone On The Small Finger Side At The Wrist Level	\$743.17
	Arthroplasty Or Replacement Of Wrist Bone, One Wrist Bone (Scaphoid Or Navicular Bone)	\$718.37
	Arthroplasty Or Replacement Of Wrist Bone, One Wrist Bone (Lunate Bone)	\$759.45
	Arthroplasty Or Replacement Of Wrist Bone, One Wrist Bone (Trapezium Bone)	\$660.23
	Arthroplasty Or Replacement Of The Entire Wrist Joint	\$1,064.95
	Arthroplasty, Interposition, Intercarpal Or Carpometacarpal Joints	\$847.91
	Arthroplasty With Removal Of Implant	\$943.09
	Stapling Of Growth Plate Of Either Of The Two Main Forearm Bones	\$567.91
	Stapling Of Growth Plate Of Both Of The Two Main Forearm Bones	\$669.99
	Stabilization Of Forearm Bone On The Thumb Side (Radius)	\$657.90
	Stabilization Of Forearm Bone On The Small Finger Side (Ulna)	\$675.82
25492	Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methyl Methacrylate; Radius And Ulna	\$826.70
	Closed Treatment Of Broken Forearm Bone (Radius) At The Mid Portion On The Thumb Side Of The Arm Without Manipulation	\$253.34
25505	Closed Treatment Of Broken Forearm Bone (Radius) At The Mid Portion On The Thumb Side Of The Arm With Manipulation	\$359.68
25515	Open Treatment Of The Shaft Of The Forearm Bone On The Thumb Side Of The Forearm (Radius Bone)	\$690.07
25520	Closed Treatment Of Broken Forearm And Dislocated Wrist Bones	\$499.56
25525	Open Treatment Of Radial Shaft Fracture, Includes Internal Fixation, When Performed, And Closed Treatment Of Distal Radioulnar Joint Dislocation (Galeazzi Fracture/ Dislocation), Includes Percutaneous Skeletal Fixation, When Performed	\$802.98
	Open Treatment Of The Shaft Of The Forearm Bone On The Thumb Side Of The Forearm (Radius Bone) Associated With A Dislocation At The	
	Wrist, Includes Internal Hardware	\$872.19
	Closed Treatment Of Broken Forearm Bone (Ulna) At The Mid Portion On The Small Finger Side Of The Arm Without Manipulation	\$183.39
	Closed Treatment Of Broken Forearm Bone (Ulna) At The Mid Portion On The Small Finger Side Of The Arm With Manipulation	\$359.49
	Open Treatment Of The Shaft Of The Forearm Bone On The Small Finger Side Of The Forearm, Ulna Bone	\$675.51
25560	Closed Treatment Of Both Forearm Bones (Ulna And Ulna) At The Mid Portion Without Manipulation	\$276.13
	Treatment Of Closed Radial And Ulnar Shaft Fractures; With Manipulation	\$565.78
25574	Open Treatment Of Broken One Forearm Bone	\$668.62
	Open Treatment Of Broken Both Forearm Bones	\$857.88
25600	Closed Treatment Of Broken Forearm (Radius) Bone At The Wrist Area On The Thumb Side Of The Wrist Without Manipulation	\$303.52
2560F	Treatment Of Closed Distal Radial Fracture (Eg, Colles Or Smith Type) Or Epiphyseal Separation, With Or Without Fracture Of Ulnar Styloid; With Manipulation	\$559.61
	Insertion Of Hardware To Lower Forearm Bone Broken Or Growth Plate Separation, Accessed Through The Skin	\$671.11
	Open Treatment Of Distal Radial Extra-Articular Fracture Or Epiphyseal Separation, With Internal Fixation	
	Open Treatment Of Distal Radial Extra-Articular Fracture Or Epiphyseal Separation; With Internal Fixation Of 2 Fragments	\$732.70 \$937.60
		\$827.60
	Open Treatment Of Distal Radial Intra-Articular Fracture Or Epiphyseal Separation; With Internal Fixation Of 3 Or More Fragments Closed Treatment Of Broken Wrist Bone (Carpal) (Navicular) Near The Thumb Side Of The Wrist, Without Manipulation	\$1,055.88
		\$213.62
	Closed Treatment Of Broken Wrist Bone (Carpal) (Navicular) Near The Thumb Side Of The Wrist, With Manipulation Once Treatment Of Broken Wrist (Carpal) Report Page 18 Thumb And Wrist (Navigular)	\$440.69
25628	Open Treatment Of Broken Wrist (Carpal) Bone, Between The Thumb And Wrist (Navicular)	\$634.92
25630	Closed Treatment Of Broken Wrist Bone (Carpal) Other Than The Navicular Bone Near The Thumb Side Of The Wrist, Without Manipulation	\$211.71
25635	Closed Treatment Of Broken Wrist Bone (Carpal) Other Than The Navicular Bone Near The Thumb Side Of The Wrist, With Manipulation	\$438.21
	Open Treatment Of Broken Other Wrist (Carpal) Bone, Than The Bone Between The Thumb And Wrist (Navicular)	\$570.94
	Closed Treatment of Ulnar Styloid Fracture	\$229.07
	Insertion Of Hardware Broken Bone Of Forearm At Wrist, Accessed Through The Skin	\$479.07
	Open Treatment Of Ulnar Styloid Fracture	\$626.97
	Closed Treatment Of Dislocated Wrist Between The Forearm Bone And The Hand, With Manipulation	\$418.40
	Open Treatment Of Radiocarpal Or Intercarpal Dislocation, One Or More Bones	\$559.62
	Insertion Of Hardware To Dislocated Wrist, Accessed Through The Skin	\$490.35
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25675	Closed Treatment Of Dislocated Wrist Between The Thumb Side And Small Finger Side Forearm Bones At The Wrist, With Manipulation	\$308.73
	Open Treatment Of Distal Radioulnar Dislocation, Acute Or Chronic	\$580.76
25680	Closed Treatment Of Dislocated Wrist Through The Mid Portion Of The Wrist (Carpus) Bones With Manipulation	\$492.10

	Description	Fee
	Open Treatment Of Trans-Scaphoperilunar Type Of Fracture Dislocation Closed Treatment Of Lunate Dislocation, With Manipulation	\$672.32
	Open Treatment Of Dislocation Wrist Bone (Lunate)	\$456.84 \$582.35
	Arthrodesis, Wrist; Complete, Without Bone Graft (Includes Radiocarpal And/ Or Intercarpal And/Or Carpometacarpal Joints)	\$745.96
	Arthrodesis, Wrist Joint; With Sliding Graft	\$774.18
	Arthrodesis, Wrist Joint; With Iliac Or Other Autogenous Distant Bone Graft (Includes Obtaining Graft)	\$774.10
	Arthrodesis, Wrist; Limited, Without Bone Graft (Eg, Intercarpal Or Radiocarpal)	\$684.12
	Intercarpal Fusion; With Autogenous Bone Graft (Includes Obtaining Graft)	\$736.72
	Arthrodesis, Distal Radioulnar Joint With Segmental Resection Of Ulna, With Or Without Bone Graft (Eg, Sauve-Kapandji Procedure)	\$969.11
	Amputation, Forearm, Through Radius And Ulna;	\$657.30
	Amputation Through Both Bones Of Forearm, Open Procedure	\$658.46
	Amputation, Forearm, Through Radius And Ulna; Secondary Closure Or Scar Revision	\$564.65
	Amputation, Forearm, Through Radius And Ulna; Reamputation	\$595.16
	Krukenberg Procedure	\$1,055.08
	Removal Of Tendons, Ligaments, And Muscles Of Wrist	\$676.36
	Removal Of Tendons, Ligaments, And Muscles Of Wrist, Secondary Closure	\$601.24
	Removal Of Tendons, Ligaments, And Muscles Of Wrist With Re-Amputation Of Remaining Arm	\$661.19
	Transmetacarpal Amputation;	\$813.82
	Transmetacarpal Amputation; Secondary Closure Or Scar Revision	\$550.79
	Transmetacarpal Amputation; Reamputation	\$756.17
	Unlisted Procedure, Forearm Or Wrist	Price By Report
	Drainage Of Finger Abscess, Uncomplicated	\$248.78
	Drainage of Finger Abscess, Complicated	\$346.99
	Drainage Of Tendon Sheath, Digit And/Or Palm, Each	\$377.51
	Drainage Of Palmar Bursa; Single, Bursa	\$389.60
	Drainage Of Palmar Bursa; Multiple Bursa	\$472.90
	Incision, Bone Cortex, Hand Or Finger (Eg, Osteomyelitis Or Bone Abscess)	\$485.08
	Decompression Fingers And/Or Hand, Injection Injury (Eg, Grease Gun, Etc)	\$747.02
26037	Decompressive Fasciotomy, Hand (Excludes 26035)	\$515.49
26040	Release Of Tissues Of Palm, Accessed Through The Skin	\$295.16
26045	Partial Release Of Tissues Of Palm, Open Procedure	\$410.35
26055	Tendon Sheath Incision (Eg, For Trigger Finger)	\$421.08
26060	Incision Of Finger Tendon, Accessed Through The Skin	\$241.32
26070	Exploration, Drainage, Or Removal Of Foreign Body Of Wrist Bone	\$299.20
26075	Exploration, Drainage, Or Removal Of Foreign Body Of Joint Between The Fingers And The Hand	\$307.32
26080	Exploration, Drainage, Or Removal Of Foreign Body Of Hand Joint Between The Finger Joints	\$353.74
26100	Arthrotomy With Biopsy; Carpometacarpal Joint, Each	\$315.82
26105	Arthrotomy With Biopsy; Metacarpophalangeal Joint, Each	\$317.90
26110	Arthrotomy With Synovial Biopsy; Interphalangeal Joint, Each	\$303.68
26111	Arthrotomy With Biopsy; 1.5 Cm Or Greater	\$424.56
26113	Arthrotomy With Biopsy; 1.5 Cm Or Greater	\$575.45
26115	Excision, Tumor Or Vascular Malformation, Soft Tissue Of Hand Or Finger, Subcutaneous; Less Than 1.5 Cm	\$385.95
26116	Excision, Tumor, Soft Tissue, Or Vascular Malformation, Of Hand Or Finger, Subfascial (Eg, Intramuscular); Less Than 1.5 Cm	\$378.40
26117	Removal (Less Than 3 Centimeters) Tissue Growth Of Hand Or Finger	\$675.63
	Removal (3 Centimeters Or Greater) Tissue Growth Of Hand Or Finger	\$961.68
26121	Removal Of Tissue Of Palm Only	\$553.21
26123	Removal Of Tissue Of Palm And Release Of Finger	\$855.63
26125	Removal Of Tissue Of Palm And Release Of Finger, Additional Digit	\$267.74
26130	Removal Of The Lining Of The Wrist Joint	\$434.37
26135	Synovectomy, Metacarpophalangeal Joint Including Intrinsic Release And Extensor Hood Reconstruction, Each Digit	\$512.51
	Removal Of The Joint Lining And Repair Of The Tendon On The Topside Of The Finger (Extensor Tendon)	\$470.67
	Repair Of Tendon, Finger And/Or Hand	\$530.15
	Excision Of Lesion Of Tendon Sheath Or Joint Capsule (Eg, Cyst, Mucous Cyst, Or Ganglion), Hand Or Finger	\$437.41
	Excision Of Tendon, Palm, Flexor Or Extensor, Single, Each Tendon	\$379.43
	Excision Of Tendon, Finger, Flexor Or Extensor, Each Tendon	\$384.47
	Sesamoidectomy, Thumb Or Finger (Separate Procedure)	\$514.58
	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Metacarpal;	\$413.19
	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Metacarpal; With Autogenous Graft (Includes Obtaining Graft)	\$556.90
26210	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;	\$415.76
	Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)	\$522.49
	Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis); Metacarpal	\$461.97
	Partial Removal Of Finger Bone For Bone Infection At The Middle Of Hand Side Of The Finger	\$424.99
	Partial Removal Of Finger Bone For Bone Infection At The End Of The Finger	\$375.25
	Radical Resection Of Tumor, Metacarpal	\$965.92
26260	Radical Resection Of Tumor, Proximal Or Middle Phalanx Of Finger	\$725.40
00	Radical Resection Of Tumor, Distal Phalanx Of Finger	\$577.21
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26320	Removal Of Implant From Finger Or Hand	\$325.85
26320 26340	Removal Of Implant From Finger Or Hand Manipulation, Finger Joint, Under Anesthesia, Each Joint	\$333.26
26320 26340 26341	Removal Of Implant From Finger Or Hand Manipulation, Finger Joint, Under Anesthesia, Each Joint Manipulation Of Palm Pretendinous Cord Following Enzyme Injection	\$333.26 \$110.62
26320 26340 26341 26350	Removal Of Implant From Finger Or Hand Manipulation, Finger Joint, Under Anesthesia, Each Joint Manipulation Of Palm Pretendinous Cord Following Enzyme Injection Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) Without A Graft Not In Zone 2	\$333.26 \$110.62 \$654.75
26320 26340 26341 26350 26352	Removal Of Implant From Finger Or Hand Manipulation, Finger Joint, Under Anesthesia, Each Joint Manipulation Of Palm Pretendinous Cord Following Enzyme Injection Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) Without A Graft Not In Zone 2 Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) With A Graft Not In Zone 2	\$333.26 \$110.62 \$654.75 \$795.00
26320 26340 26341 26350 26352 26356	Removal Of Implant From Finger Or Hand Manipulation, Finger Joint, Under Anesthesia, Each Joint Manipulation Of Palm Pretendinous Cord Following Enzyme Injection Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) Without A Graft Not In Zone 2 Repair Of Finger Tendon (Primary) On The Under Side Of The Hand (Flexor) Without A Graft Not In Zone 2 Repair Of Finger Tendon (Primary) On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2	\$333.26 \$110.62 \$654.75 \$795.00 \$825.45
26320 26340 26341 26350 26352 26356 26357	Removal Of Implant From Finger Or Hand Manipulation, Finger Joint, Under Anesthesia, Each Joint Manipulation Of Palm Pretendinous Cord Following Enzyme Injection Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) Without A Graft Not In Zone 2 Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) With A Graft Not In Zone 2 Repair Of Finger Tendon (Primary) On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2 Repair Of Finger Tendon (Secondary) On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2	\$333.26 \$110.62 \$654.75 \$795.00 \$825.45 \$821.31
26320 26340 26341 26350 26352 26356 26357 26358	Removal Of Implant From Finger Or Hand Manipulation, Finger Joint, Under Anesthesia, Each Joint Manipulation Of Palm Pretendinous Cord Following Enzyme Injection Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) Without A Graft Not In Zone 2 Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) With A Graft Not In Zone 2 Repair Of Finger Tendon (Primary) On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2 Repair Of Finger Tendon (Secondary) On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2 Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2	\$333.26 \$110.62 \$654.75 \$795.00 \$825.45 \$821.31
26320 26340 26341 26350 26352 26356 26357 26358 26370	Removal Of Implant From Finger Or Hand Manipulation, Finger Joint, Under Anesthesia, Each Joint Manipulation Of Palm Pretendinous Cord Following Enzyme Injection Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) Without A Graft Not In Zone 2 Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) With A Graft Not In Zone 2 Repair Of Finger Tendon (Primary) On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2 Repair Of Finger Tendon (Secondary) On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2	\$333.26 \$110.62 \$654.75 \$795.00 \$825.45 \$821.31

Code	Description	Fee
	Repair Of Finger Deep Tendon (Secondary) On The Under Side Of The Hand (Flexor) With An Intact Superficial Tendon)	\$838.39
	Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) With Implanted Rod	\$827.81
	Removal Of Synthetic Rod And Insertion Of Flexor Tendon Graft, Hand Or Finger (Includes Obtaining Graft), Each Rod	\$946.52
26410	Repair, Extensor Tendon, Hand, Primary Or Secondary; Without Free Graft, Each Tendon	\$424.78
26412	Extensor Tendon Repair, Dorsum Of Hand, Single, Primary Or Secondary; With Free Graft (Includes Obtaining Graft), Each Tendon	\$686.31
	Excision Of Extensor Tendon, With Implantation Of Synthetic Rod For Delayed Tendon Graft, Hand Or Finger, Each Rod	\$922.47
	Removal Of Synthetic Rod And Insertion Of Extensor Tendon Graft (Includes Obtaining Graft), Hand Or Finger, Each Rod	\$870.78
26418	Repair Of Finger Tendon On The Top Side Of The Hand (Extensor) Without A Graft	\$441.63
26420	Repair Of Finger Tendon On The Top Side Of The Hand (Extensor) With A Graft	\$665.05
	Repair Of Extensor Tendon, Central Slip, Secondary (Eg, Boutonniere Deformity); Using Local Tissue(S), Including Lateral Band(S), Each	
	Finger	\$519.02
	Repair Of Finger Tendon On The Top Side Of The Hand (Extensor) With A Graft, Central Slip, Boutonniere Deformity Closed Treatment Of Distal Extensor Tendon Insertion, With Or Without Percutaneous Pinning (Eg, Mallet Finger)	\$758.95
	Repair Of Finger Tendon On The Top Side Of The Hand (Extensor) Without A Graft Toward The End Of The Finger (Mallet Finger)	\$385.09 \$516.35
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26434	Repair Of Finger Tendon On The Top Side Of The Hand (Extensor) Without A Graft Toward The End Of The Finger (Mallet Finger) With A Graft	\$487.26
	Realignment Finger Tendon On The Top Side Of The Hand (Extensor) Without A Graft	\$598.62
26440	Removal Of Scar Tissue To Release Tendon On The Palm Of The Hand (Flexor) Or Finger	\$587.47
	Tenolysis, Simple, Flexor Tendon; Palm And Finger, Each Tendon	\$937.84
	Removal Of Scar Tissue To Release Tendon On The Top Of The Hand (Extensor) Or Finger	\$431.39
	Tenolysis, Complex, Extensor Tendon, Finger, Including Forearm, Each Tendon	\$643.55
	Incision Of Tendon Of Palm, Open Procedure	\$445.41
	Incision Of Tendon Of Finger, Open Procedure Incision Of Tendon Of Hand Or Finger, Open Procedure	\$416.87
	Tenodesis; Of Proximal Interphalangeal Joint, Each Joint	\$434.47 \$632.18
_	Tenodesis; Of Distal Joint, Each Joint	\$624.47
	Lengthening Of Tendon Of Hand Or Finger On The Back Of The Hand (Extensor)	\$617.16
	Shortening Of Tendon, Extensor, Hand Or Finger, Each Tendon	\$600.53
	Lengthening Of Tendon Of Hand Or Finger On The Front Of The Hand (Flexor)	\$634.82
26479	Shortening Of Tendon Of Hand Or Finger On The Front Of The Hand (Flexor)	\$646.20
	Transplant Of Tendon Of Hand, Without Graft	\$694.76
	Transplant Of Tendon Of Hand, With Graft	\$828.94
	Transplant Of Tendon To Palm, Without Tendon Graft Other Than Thumb	\$585.99
	Transplant Of Tendon To Palm, With Tendon Graft Other Than Thumb	\$913.53
	Transplant Of Thumb Tendon To Palm, With Tendon Graft Other Than Thumb	\$744.46
	Transplant Of Thumb Tendon To Palm, With Tendon Graft Other Than Thumb Opponens Plasty; Hypothenar Muscle Transfer	\$874.72 \$796.57
	Transplant Of Tendon Thumb, Palm, Or Wrist	\$854.44
	Transfer Of Tendon To Restore Intrinsic Function; Ring And Small Finger	\$853.46
	Transfer Of Tendon Of Hand, All Four Fingers	\$1,100.45
26499	Correction Claw Finger, Other Methods	\$822.77
26500	Reconstruction Of Tendon Pulley, Each Tendon; With Local Tissues (Separate Procedure)	\$594.15
	Tendon Pulley Reconstruction; With Tendon Or Fascial Graft (Includes Obtaining Graft) (Separate Procedure)	\$718.50
	Release Of Thenar Muscle(S) (Eg. Thumb Contracture)	\$474.65
	Cross Intrinsic Transfer, Each Tendon	\$614.74
	Repair Of Joint Capsule Of Hand And Finger, One Finger	\$707.86
	Repair Of Joint Capsule Of Hand And Finger, Two Fingers Repair Of Joint Capsule Of Hand And Finger, 3 Or Four Fingers	\$818.40
	Capsulectomy Or Capsulotomy; Metacarpophalangeal Joint, Each Joint	\$828.36 \$657.88
	Repair Of Joint Capsule, Hand And Finger	\$657.88 \$659.96
	Repair Of Joint Of Hand Bone And Finger, With Implant	\$500.06
	Repair Of Joint Of Hand Bone And Finger, Without Implant	\$647.54
	Joint Replacement (Arthroplasty) Without A Prosthesis	\$405.50
	Joint Replacement (Arthroplasty) With A Prosthesis Between The Finger Joints	\$653.38
	Repair Of Ligament Of Hand To Finger Joint, Or Finger Joint Without Graft	\$539.96
	Repair Of Ligament Of Hand To Finger Joint With Tendon Or Graft	\$789.21
	Repair Of Ligament Of Hand To Finger Joint With Local Tissue	\$688.64
	Repair Of Ligament Of Finger Joint With Graft Repair New Union Metagograf Or Replace (Includes Obtaining Repair New Union Without External Or Internal Fivation)	\$655.32
	Repair Non-Union, Metacarpal Or Phalanx, (Includes Obtaining Bone Graft With Or Without External Or Internal Fixation) Repair And Reconstruction, Finger, Volar Plate, Interphalangeal Joint	\$981.06 \$712.46
	Pollicization Of A Digit	\$1,529.55
	Transfer, Toe-To-Hand With Microvascular Anastomosis; Great Toe "Wrap-Around" With Bone Graft	\$3,305.00
	Transfer Of Toe To Hand, Single	\$2,977.78
	Transfer Of Toe To Hand, Double	\$3,459.88
26555	Transfer, Finger To Another Position Without Microvascular Anastomosis	\$1,292.25
	Transfer, Free Toe Joint, With Microvascular Anastomosis	\$3,097.29
	Repair Of Webbed Finger, With Skin Flaps	\$608.88
26561	Repair Of Webbed Finger, With Skin Flaps And Grafts	\$827.37
26561 26562	Repair Of Webbed Finger, Complex (Involving Bone Or Nails	\$937.23
26561 26562 26565	Repair Of Webbed Finger, Complex (Involving Bone Or Nails Osteotomy; Metacarpal, Each	\$937.23 \$684.06
26561 26562 26565 26567	Repair Of Webbed Finger, Complex (Involving Bone Or Nails Osteotomy; Metacarpal, Each Osteotomy; Phalanx Of Finger, Each	\$937.23 \$684.06 \$503.09
26561 26562 26565 26567 26568	Repair Of Webbed Finger, Complex (Involving Bone Or Nails Osteotomy; Metacarpal, Each Osteotomy; Phalanx Of Finger, Each Osteoplasty, Lengthening, Metacarpal Or Phalanx	\$937.23 \$684.06 \$503.09 \$883.29
26561 26562 26565 26567 26568 26580	Repair Of Webbed Finger, Complex (Involving Bone Or Nails Osteotomy; Metacarpal, Each Osteotomy; Phalanx Of Finger, Each Osteoplasty, Lengthening, Metacarpal Or Phalanx Repair Cleft Hand	\$937.23 \$684.06 \$503.09 \$883.29 \$1,424.83
26561 26562 26565 26567 26568 26580 26587	Repair Of Webbed Finger, Complex (Involving Bone Or Nails Osteotomy; Metacarpal, Each Osteotomy; Phalanx Of Finger, Each Osteoplasty, Lengthening, Metacarpal Or Phalanx	\$937.23 \$684.06 \$503.09 \$883.29

Code	Description	Fee
	Release, Intrinsic Muscles Of Hand, Each Muscle	\$618.43
	Excision Of Constricting Ring With Multiple Z-Plasties	\$766.85
	Closed Treatment Of Metacarpal Fracture, Single; Without Manipulation, Each Bone	\$262.95
	Treatment Of Closed Metacarpal Fracture, Single; With Manipulation, Each Bone Closed Treatment Of Metacarpal Fracture, With Manipulation, With External Fixation, Each Bone	\$334.62
	Closed Treatment Of Metacarpal Fracture, With Manipulation, With External Fixation, Each Bone Insertion Of Hardware To Broken Finger, Accessed Through The Skin	\$478.29 \$499.05
	Open Treatment Of Fracture Of Bone In The Midportion Of The Hand Between The Wrist And Fingers	\$591.61
	Closed Treatment Of Carpometacarpal Dislocation, Thumb, With Manipulation	\$394.67
	Closed Treatment Of Carpometacarpal Fracture Dislocation, Thumb (Bennett Fracture), With Manipulation	\$406.81
26650	Insertion Of Hardware To Broken Thumb With Manipulation, Accessed Through The Skin	\$402.77
	Open Treatment Of Carpometacarpal Fracture Dislocation, Thumb (Bennett Fracture), Includes Internal Fixation, When Performed	\$576.35
	Closed Treatment Of Carpometacarpal Dislocation, Other Than Thumb, With Manipulation, Each Joint; Without Anesthesia Treatment Of Closed Carpometacarpal Dislocation, Other Than Bennett Fracture, Single, With Manipulation; Requiring Anesthesia	\$240.47 \$433.53
	Insertion Of Hardware To Dislocated Hand Bone At Wrist Joint With Manipulation, Accessed Through The Skin	\$546.75
	Open Treatment Of Dislocation At The Wrist To Mid Hand Bones, Except The Thumb, Single	\$533.22
	Open Treatment Of Dislocation At The Wrist To Mid Hand Bones, Except The Thumb, Multiple	\$585.98
26700	Closed Treatment Of Metacarpophalangeal Dislocation, Single, With Manipulation; Without Anesthesia	\$232.47
26705	Treatment Of Closed Metacarpophalangeal Dislocation, Single, With Manipulation; Requiring Anesthesia	\$392.94
	Insertion Of Hardware To Dislocated Hand Joint With Manipulation, Accessed Through The Skin	\$415.88
	Open Treatment Of Metacarpophalangeal Dislocation, Single, Includes Internal Fixation, When Performed	\$504.66
	Closed Treatment Of Broken Finger Or Thumb At The Mid Portion Or Part Near The Hand Without Manipulation Closed Treatment Of Broken Finger Or Thumb At The Mid Portion Or Part Near The Hand With Manipulation	\$198.83
	Closed Treatment Of Broken Finger Or Thumb At The Mid Portion Or Part Near The Hand With Manipulation Insertion Of Hardware To Broken Finger Or Thumb With Manipulation, Accessed Through The Skin	\$367.07 \$439.20
20121	Open Treatment Of Phalangeal Shaft Fracture, Proximal Or Middle Phalanx, Finger Or Thumb, Includes Internal Fixation, When Performed,	ψ 4 35.20
26735		\$403.03
	Closed Treatment Of Articular Fracture, Involving Metacarpophalangeal Or Interphalangeal Joint; Without Manipulation, Each	\$220.59
26742	Treatment Of Closed Articular Fracture, Involving Metacarpophalangeal Or Proximal Interphalangeal Joint; With Manipulation, Each	\$258.37
	Open Treatment Of Articular Fracture, Involving Metacarpophalangeal Or Interphalangeal Joint, Includes Internal Fixation, When Performed,	
26746		\$501.26
	Closed Treatment Of Broken Finger Or Thumb At The Portion Furthest Away From The Hand Without Manipulation Closed Treatment Of Broken Finger Or Thumb At The Portion Furthest Away From The Hand With Manipulation	\$182.19 \$288.91
	Insertion Of Hardware To Broken Finger Or Thumb, Accessed Through The Skin	\$414.78
	Open Treatment Of Distal Phalangeal Fracture, Finger Or Thumb, Includes Internal Fixation, When Performed, Each	\$342.18
	Closed Treatment Of Interphalangeal Joint Dislocation, Single, With Manipulation; Without Anesthesia	\$196.70
26775	Treatment Of Closed Interphalangeal Joint Dislocation, Single, With Manipulation; Requiring Anesthesia	\$356.71
	Insertion Of Hardware To Dislocated Finger Joint With Manipulation, Accessed Through The Skin	\$420.87
	Open Treatment Of Interphalangeal Joint Dislocation, Includes Internal Fixation, When Performed, Single	\$371.25
	Fusion In Opposition, Thumb, With Autogenous Graft (Includes Obtaining Graft)	\$785.86
	Arthrodesis, Carpometacarpal Joint, Thumb, With Or Without Internal Fixation; Arthrodesis, Carpometacarpal Joint, Thumb, With Or Without Internal Fixation; With Autogenous Graft (Includes Obtaining Graft)	\$735.67 \$787.82
	Arthrodesis, Carpometacarpal Joint, Triding, With Or Without Internal Fraction, With Addogenous Graft (includes Obtaining Graft) Arthrodesis, Carpometacarpal Joint, Digit, Other Than Thumb, Each;	\$742.97
	Arthrodesis, Carpometacarpal Joint, Digits, Other Than Thumb; With Autogenous Graft (Includes Obtaining Graft)	\$813.27
26850	Fusion Of The Joints Between Finger Joints	\$513.01
	Fusion Of The Joints Between Finger Joints, With Bone Graft From The Patient	\$788.84
	Fusion Of The Joints Between The Finger And The Hand	\$431.50
	Fusion Of The Joints Between The Finger And The Hand, Additional Joint	\$91.28
	Fusion Of The Joints Between The Finger And The Hand, With Bone Graft From The Patient Fusion Of Finger Joint With Bone Graft, Additional Joint	\$728.91
	Amputation Of Hand Bone, Finger, Or Thumb	\$203.84 \$722.32
	Amputation, Finger Or Thumb, Primary Or Secondary, Any Joint Or Phalanx, Single, Including Neurectomies; With Direct Closure	\$652.97
	Amputation Of Finger Or Thumb, With Tissue Flap	\$477.96
26989	Unlisted Procedure, Hands Or Fingers	Price By Report
	Incision And Drainage; Deep Abscess Or Hematoma	\$463.89
	Incision And Drainage; Infected Bursa	\$663.19
	Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess)	\$923.79
	Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure	\$299.42 \$424.86
	Incision of Hip Tendon With Removal Of Nerve, Open Procedure	\$550.35
	Incision Of Flexor Tendons Of Hip, Open Procedure	\$619.92
27006	Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure	\$661.86
	Fasciotomy, Hip Or Thigh, Any Type	\$839.91
	Incision Of Tissue Of Muscle Compartments Of One Side Of Pelvis	\$804.24
	Arthrotomy, Hip, With Drainage (Eg, Infection)	\$999.15
	Arthrotomy, Hip, Including Exploration Or Removal Of Loose Or Foreign Body Denervation, Hip Joint, Intrapelvic Or Extrapelvic Intra-Articular Branches Of Sciatic, Femoral, Or Obturator Nerves	\$882.30 \$1,089.63
21033	Capsulectomy Or Capsulotomy, Hip, With Or Without Excision Of Heterotopic Bone, With Release Of Hip Flexor Muscles (Ie, Gluteus Medius,	φ1,009.03
27036	Gluteus Minimus, Tensor Fascia Latae, Rectus Femoris, Sartorius, Iliopsoas)	\$925.72
	Biopsy Of Tissue Of Pelvis And Hip, Superficial	\$324.28
27040		\$645.81
27041	Biopsy Of Tissue Of Pelvis And Hip, Deep	
27041 27043	Biopsy, Soft Tissue Of Pelvis And Hip Area; 3 Cm Or Greater	\$496.81
27041 27043 27045	Biopsy, Soft Tissue Of Pelvis And Hip Area; 3 Cm Or Greater Biopsy, Soft Tissue Of Pelvis And Hip Area; 5 Cm Or Greater	\$496.81 \$663.73
27041 27043 27045 27047	Biopsy, Soft Tissue Of Pelvis And Hip Area; 3 Cm Or Greater Biopsy, Soft Tissue Of Pelvis And Hip Area; 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Pelvis And Hip Area, Subcutaneous; Less Than 3 Cm	\$496.81 \$663.73 \$465.74
27041 27043 27045 27047 27048	Biopsy, Soft Tissue Of Pelvis And Hip Area; 3 Cm Or Greater Biopsy, Soft Tissue Of Pelvis And Hip Area; 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Pelvis And Hip Area, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Pelvis And Hip Area, Subfascial (Eg, Intramuscular); Less Than 5 Cm	\$496.81 \$663.73 \$465.74 \$551.70
27041 27043 27045 27047 27048 27049	Biopsy, Soft Tissue Of Pelvis And Hip Area; 3 Cm Or Greater Biopsy, Soft Tissue Of Pelvis And Hip Area; 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Pelvis And Hip Area, Subcutaneous; Less Than 3 Cm	\$496.81 \$663.73 \$465.74

Code	Description	Fee
	Arthrotomy With Synovectomy, Hip Joint	\$700.04
	Incision Of Tissue On One Side Of Pelvic Muscle Compartment With Removal Of Muscle	\$914.76
	Removal (5 Centimeters Or Greater) Tissue Growth Of Pelvis Or Hip	\$1,623.49
27060	Excision; Ischial Bursa	\$428.95
	Excision; Trochanteric Bursa Or Calcification	\$390.34
	Removal Of Bone Cyst Or Growth Of Hip Or Pelvic Bone, Superficial	\$484.71
27066	Removal Of Bone Cyst Or Growth Of Hip Or Pelvic Bone, Deep"	\$744.15
07007	Excision Of Bone Cyst Or Benign Tumor, Wing Of Ilium, Symphysis Pubis, Or Greater Trochanter Of Femur; With Autograft Requiring Separate	CO 44 42
	Incision Partial Removal Of Hip Or Pelvic Bone, Superficial	\$941.13 \$820.31
	Partial Removal Of Hip Or Pelvic Bone, Deep	\$897.20
27071	Radical Removal Of Growth From Wing Of Upper Pelvic Bone (Illium), Base Of Pelvic Bone (Ischium), 1 Pubic Bone Or Joint Between Pubic	Ψ001.20
27075	Bones	\$1,869.58
	Radical Removal Of Growth From Upper Pelvic Bone (Ilium) Including Hip Socket, Base Of Pelvic Bone (Ischium) Including Hip Socket, Or Both	
	Pubic Bones	\$2,256.39
27077	Radical Resection Of Tumor; Innominate Bone, Total	\$2,514.77
07070	Position Demonstration County France Cit Dance Of Dataire (Josephin) And Union Ford Of Chaff Of Think Dance (County Transferration)	£4.040.50
	Radical Removal Of Growth From Sit Bone Of Pelvis (Ischial Tuberosity) And Upper End Of Shaft Of Thigh Bone (Greater Trochanter) Coccygectomy, Primary	\$1,843.59 \$444.79
	Removal Of Foreign Body In Tissue Of Pelvis Or Hip, Accessed Beneath The Skin	\$298.21
	Removal Of Foreign Body, Pelvis Or Hip; Deep (Subfascial Or Intramuscular)	\$555.87
	Removal Of Hip Prosthesis; (Separate Procedure)	\$756.93
	Removal Of Hip Prosthesis, Complicated	\$1,594.39
27093	Injection Procedure For Hip Arthrography; Without Anesthesia	\$171.51
27095	Injection Procedure For Hip Arthrography; With Anesthesia	\$313.73
	Injection Procedure For Sacroiliac Joint, Anesthetic/Steroid, With Image Guidance (Fluoroscopy Or Ct) Including Arthrography When Performed	\$173.39
	Release Or Recession, Hamstring, Proximal	\$625.60
	Transfer, Adductor To Ischium Transfer Of Musels To Think Bone Addition Initiated Subsection Musels	\$671.32
	Transfer Of Muscle To Thigh Bone At Hip Joint, External Oblique Muscle Transfer Paraspinal Muscle To Hip (Includes Fascial Or Tendon Extension Graft)	\$758.33 \$794.16
	Transfer of Muscle To Thigh Bone At Hip Joint, Iliopsoas Muscle	\$883.27
	Transfer Iliopsoas; To Femoral Neck	\$823.32
	Acetabuloplasty; (Eg, Whitman, Colonna, Haygroves, Or Cup Type)	\$1,304.76
	Acetabuloplasty; Resection, Femoral Head (Eg, Girdlestone Procedure)	\$1,000.66
27125	Hemiarthroplasty, Hip, Partial (Eg, Femoral Stem Prosthesis, Bipolar Arthroplasty)	\$1,137.81
	Arthroplasty, Acetabular And Proximal Femoral Prosthetic Replacement (Total Hip Arthroplasty), With Or Without Autograft Or Allograft	\$1,286.37
	Conversion Of Previous Replacement Of Thigh Bone And Hip Joint Prosthesis	\$1,670.83
	Revision Of Total Hip Arthroplasty Both Components, With Or Without Autograft Or Allograft	\$1,898.88
	Revision Of Total Hip Arthroplasty Acetabular Component Only, With Or Without Autograft Or Allograft Revision Of Total Hip Arthroplasty Femoral Component Only, With Or Without Allograft	\$1,464.74 \$1,521.89
	Osteotomy And Transfer Of Greater Trochanter Of Femur (Separate Procedure)	\$812.64
	Osteotomy, Iliac, Acetabular Or Innominate Bone;	\$1,031.56
	Incision Of Pelvic Bone With Repair Of Hip Joint Dislocation, Open Procedure	\$1,318.99
	Osteotomy, Iliac, Acetabular Or Innominate Bone; With Femoral Osteotomy	\$1,424.36
27156	Incision Of Pelvic And Thigh Bone With Repair Of Hip Joint Dislocation, Open Procedure	\$1,637.72
27158	Osteotomy, Pelvis, Bilateral (Eg, Congenital Malformation)	\$1,263.39
	Incision Of Neck Of Thigh Bone	\$1,104.83
	Incision Below Neck Of Thigh Bone (Intertrochanteric Or Subtrochanteric)	\$1,398.61
	Bone Graft, Femoral Head, Neck, Intertrochanteric Or Subtrochanteric Area (Includes Obtaining Bone Graft)	\$1,053.34
	Treatment Of Slipped Femoral Epiphysis; By Traction, Without Reduction	\$607.07
	Treatment Of Slipped Femoral Epiphysis; By Single Or Multiple Pinning, In Situ	\$904.90
	Open Treatment Of Slipped Femoral Epiphysis; Single Or Multiple Pinning Or Bone Graft (Includes Obtaining Graft) Open Treatment Of Slipped Femoral Epiphysis; Closed Manipulation With Single Or Multiple Pinning	\$1,124.33 \$897.58
	Open Treatment Of Slipped Femoral Epiphysis; Osteoplasty Of Femoral Neck (Heyman Type Procedure)	\$889.94
	Open Treatment Of Slipped Femoral Epiphysis; Osteotomy And Internal Fixation	\$1,014.74
	Epiphyseal Arrest By Epiphysiodesis Or Stapling, Greater Trochanter Of Femur	\$656.92
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27187	Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methyl Methacrylate, Femoral Neck And Proximal Femur	\$1,006.53
	Closed Treatment Of Fracture And/Or Dislocation Of Pelvis And/Or Sacrum	\$123.44
	Closed Treatment Of Fracture And/Or Dislocation Of Pelvis And/Or Sacrum With Manipulation	\$309.96
	Closed Treatment Of Coccygeal Fracture	\$176.55
27202	Open Treatment Of Coccygeal Fracture	\$481.73
27215	Open Treatment Of Iliac Spine(S), Tuberosity Avulsion, Or Iliac Wing Fracture(S) (Eg, Pelvic Fracture(S) Which Do Not Disrupt The Pelvic Ring), With Internal Fixation	\$969.34
	Insertion Of Hardware To Broken And/Or Dislocated Bone On One Side Of Pelvis, Accessed Through The Skin	\$436.54
	Open Treatment Of Fracture And/Or Dislocation Of Pelvis, Anterior	\$1,178.88
	Open Treatment Of Fracture And/Or Dislocation Of Pelvis, Posterior	\$1,416.27
	Closed Treatment Of Acetabulum (Hip Socket) Fracture(S); Without Manipulation	\$385.41
	Treatment Of Closed Acetabulum (Hip Socket) Fracture(S); With Manipulation With Or Without Skeletal Traction	\$894.41
	Open Treatment Of Posterior Or Anterior Acetabular Wall Fracture, With Internal Fixation	\$1,061.77
	Open Treatment Of Fracture Of Front Or Back Column Of Hip Socket Or Across Hip Socket With Insertion Of Fixation Hardware	\$1,493.39
	Open Treatment Of Fracture Of Front And Back Column Or Wall Of Hip Socket With Insertion Of Fixation Hardware	\$1,608.57
	Closed Treatment Of Femoral Fracture, Proximal End, Neck; Without Manipulation	\$451.29
	Closed Treatment Of Fracture Of Neck Of Thigh Bone With Manipulation	\$665.72
	Insertion Of Hardware To Broken Thigh Bone, Accessed Through The Skin	\$916.51

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27250 Consent Treatment Of Hip Dislocation, Thurwards (William Ameritanis) 27253 Generation (Cloude Hip Dislocation, Thurwards (William Ameritanis) 27255 Generation (Cloude Hip Dislocation, Thurwards (William Ameritanis) 27256 Generation (Cloude Hip Dislocation, Thurwards (William Ameritanis) 27257 Treatment Of Sportanismos, Hip Dislocation (Developmental Including Congrenial Or Pathological), By Abduction, Spirit Of Traction, William (Cloude) 27257 Treatment Of Sportanismos (Hip Dislocation) 27258 Open Treatment Of Sportanismos (Hip Dislocation) 27258 Open Treatment Of Sportanismos (Hip Dislocation) 27259 Colosed Treatment Of Post (Hip Ameritanis) 27259 Colosed Treatment Of Post (Hip Ameritanis) 27250 Colosed Treatment Of Post	27246	Closed Treatment Of Broken Hip, Trochanter	\$348.81
27252 Construction Of Production, Transmiss, Requiring Ansenbesia 27253 Copen Treatment Of High Discosotion, Transmiss, With Acadeabular Wall And Fenoral Head Fracture, With DW Without Internal Or External Fination 27255 Copen Treatment Of High Discosotion, Transmiss, With Acadeabular Wall And Fenoral Head Fracture, With DW Without Internal Or External Fination 27256 Assentiated in Compensal High Discosotion, By Adulactions, Spirit Or Treatment Of Septiment (1997) Annual Production (Developmental, Including Congenitat Or Parthologicus), By Adulaction, Spirit Or Treatment (2014) Assentiated (1997) Annual Production (Developmental, Including Congenitat Or Parthologicus), Replacement Of Fernical Head In 22756 Assentiated (1997) Annual Production (Developmental, Including Congenitate Or Parthologicus), Replacement Of Fernical Head In 22756 (Assentiated Including Congenitate Or Parthologicus), Replacement Of Fernical Head In 22756 (Assentiated Including Congenitate Or Parthologicus), Replacement Of Fernical Head In 22756 (Assentiated Including Congenitate Or Parthologicus), Replacement Of Fernical Head In 22756 (Costa Treatment Of Expensions Arthropiates Dislocation, William Production (1997) Annual Product	27248	Open Treatment Of Broken Thigh Bone Using Internal Fixation	\$679.02
27253 Open Treatment Of Hip Dislocation, Traumatic, With Actitudar Wall And Famoral Head Facture, With Or Without Internal Fluston 27254 Open Treatment Of Hip Dislocation, Traumatic, With Actitudar Wall And Famoral Head Facture, With Or Without Internal Or External Fluston 27255 Treatment Of Comprehal Pip Dislocation (Developmental including Comprehal Or Pathologous, 6) Adoction, Spirit Or Traction, With Mamphalition Requiring American Science of Comprehal Pip Dislocation, Pathologous, 60 Adoction, Spirit Or Traction, With Mamphalition Requiring American Science of Comprehal Pip Dislocation, Pathologous, 70 Adoction, Spirit Or Traction, With Mamphalition Requiring American Science of Comprehal Pip Dislocation, Pathologous, 70 Adoction,	27250	Closed Treatment Of Hip Dislocation, Traumatic; Without Anesthesia	\$175.16
27224 Open Treatment Of Hip Dislocation, Triumatic, With Acetabular Wall And Femoral Head Facture, With Or Willhout Internal Of External Pication 11:4094 Frammer Of Spontaneous Hip Dislocation (Developmental, Including Congental Or Pathological), By Aboutton Spirit Or Tractice; Wilhout Managhation (1997) Frammer Of Spontaneous Hip Dislocation (Developmental, Including Congental Or Pathological), By Aboutton Spirit Or Tractice; Wilhout Allerations (1997) Frammer Of Spontaneous Hip Dislocation, Spirit Or Tractice, With Managhation Repairing Ameniterias Frammer Of Post Programmer Or Post Post Attroplates by Dislocation, With Shortening Frammer Of Post Post Post Post Post Post Post Post	27252	Treatment Of Closed Hip Dislocation, Traumatic; Requiring Anesthesia	\$544.81
27224 Open Treatment Of Hip Dislocation, Triumatic, With Acetabular Wall And Femoral Head Facture, With Or Willhout Internal Of External Pication 11:4094 Frammer Of Spontaneous Hip Dislocation (Developmental, Including Congental Or Pathological), By Aboutton Spirit Or Tractice; Wilhout Managhation (1997) Frammer Of Spontaneous Hip Dislocation (Developmental, Including Congental Or Pathological), By Aboutton Spirit Or Tractice; Wilhout Allerations (1997) Frammer Of Spontaneous Hip Dislocation, Spirit Or Tractice, With Managhation Repairing Ameniterias Frammer Of Post Programmer Or Post Post Attroplates by Dislocation, With Shortening Frammer Of Post Post Post Post Post Post Post Post	27253	Open Treatment Of Hip Dislocation, Traumatic, Without Internal Fixation	\$854.47
Testiment of Spontaneous Np Delacation (Developmental, Incubring Corporation), By Abbuttion, Splint O'Tractics; Without Manipulation 27263 Treatment O'Congrenial Np Delacation, By Abbuttion, Splint O'Tractics; With Manipulation Requiring Ansathesia \$326.11 Down Treatment O'Congrenial Np Delacation, Developmental, Incubring Congrenial O'Participation, Replacement O'Fernoral Head In Delacation (Progressian Progressian Pr			*
Testiment of Spontaneous Np Delacation (Developmental, Incubring Corporation), By Abbuttion, Splint O'Tractics; Without Manipulation 27263 Treatment O'Congrenial Np Delacation, By Abbuttion, Splint O'Tractics; With Manipulation Requiring Ansathesia \$326.11 Down Treatment O'Congrenial Np Delacation, Developmental, Incubring Congrenial O'Participation, Replacement O'Fernoral Head In Delacation (Progressian Progressian Pr	27254	Open Treatment Of Hip Dislocation, Traumatic, With Acetabular Wall And Femoral Head Fracture, With Or Without Internal Or External Fixation	\$1 149 94
2226 Annealmento, Winhoud Maniquation S227 Teatrement CO Congenial High Disbocation, By Abduction, Splint Or Traction; With Manipulation Requiring Anseatheaia 2226 Den Treatment Of Sprontaneous High Disbocation, Developmental, Inciding Congenial Or Pathological), Replacement Of Fernoral Head In 2226 Den Treatment Of Sprontaneous High Disbocation, With Stotisturing 2226 Den Treatment Of Sprontaneous High Disbocation, With Stotisturing 2226 Den Treatment Of Sprontaneous High Disbocation, With Stotisturing 2226 Den Treatment Of Promoral Head In 2226 Den Treatment Of Promoral Head In 2226 Cooked Treatment Of Promoral Head In 2226 Cooked Treatment Of Promoral Fracture, Proximal End, Head, With Manipulation 2226 Cooked Treatment Of Promoral Fracture, Proximal End, Head, High Manipulation 2226 Den Treatment Of Promoral Fracture, Proximal End, Head, With Manipulation 2226 Den Treatment Of Promoral Fracture, Proximal End, Head, High Manipulation 2226 Den Treatment Of Promoral Fracture, Proximal End, Head, High Manipulation 2226 Den Treatment Of Promoral Fracture, Proximal End, Head, High Manipulation 2226 Den Treatment Of Promoral Fracture, Proximal End, Head, High Manipulation 2226 Den Treatment Of Promoral Fracture, Proximal End, Head, High Manipulation 2226 Den Treatment Of Promoral Fracture, Proximal End, Head, High Manipulation 2226 Den Treatment Of Promoral Fracture, Proximal End, Head, High Manipulation 2226 Den Treatment Of Promoral Fracture, Proximal End, Head, High Manipulation 2226 Den Treatment Of Promoral Fracture, Proximal End, Head, With Manipulation 2226 Den Treatment Of Promoral Fracture, Proximal End, Head, High Manipulation 2226 Den Treatment Of Promoral Fracture, Proximal End, Head, With Manipulation 2226 Den Treatment Of Promoral Fracture, Proximal End, Head, With Manipulation 2226 Den Treatment Of Promoral Fracture, Proximal End, Head, With Manipulation 2226 Den Treatment Of Promoral Fracture, Proximal End, Head, With Manipulation 2226 Den Treatment Of Promoral Fracture, P			* 1,110101
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27258 Open Treatment OF Poet Hop Arthrophosy Nicht Stortening \$1,3415.25 27256 Coberd Treatment OF Poet Hip Arthrophosy Discoution, With Only American \$1,3425.25 27256 Coberd Treatment OF Poet Hip Arthrophosy Discoution, Without American \$1,3425.25 27256 Coberd Treatment OF Poet Hip Arthrophosy Discoution, Without American \$1,3425.27 27256 Coberd Treatment OF Discher Hip Arthrophosy Discoution, Requiring Regional Or General American \$1,3225.27 27257 Coberd Treatment OF Discher Hip Arthrophosy Or Arthrophosy \$1,3225.27 27258 Coberd Treatment OF Discher Hip Arthrophosy \$1,3225.27 27257 Coberd Treatment OF Discher Hip Arthrophosy \$1,3225.27 27258 Coberd Treatment OF Discher Hip Arthrophosy \$1,3225.27 27259 Coberd Treatment OF Discher Hip Arthrophosy \$1,3225.27 27257 Coberd Treatment OF Discher Hip Arthrophosy \$1,3225.27 27258 Coberd Treatment OF Discher Hip Arthrophosy \$1,3225.27 27259 Coberd Treatment OF Discher Hip Arthrophosy \$1,3225.27 27259 Coberd Treatment OF Discher Hip Arthrophosy \$1,3225.27 27250 Indischer Arthrophosy \$1,3225.27 27250	27207		Ψ020.10
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27256 Cosed Treatment Of Post Hip Anthropistary Discotation, Without Anesthesia S1616.37 27267 Cosed Treatment of Post Hip Anthropistary Discotation, Requiring Regional Or General Anesthesia S1616.37 27267 Cosed Treatment of Discota Hip, At The Joint S27267 Cosed Treatment of Post Hip Anthropistary Discotation, Requiring Regional Or General Anesthesia S1616.37 27268 Cosed Treatment Of Fenoral Fracture, Proximal End, Head, With Manipulation S500.03 27269 Depon Treatment Of Fenoral Fracture, Proximal End, Head, With Manipulation S500.03 27269 Depon Treatment Of Fenoral Fracture, Proximal End, Head, With Manipulation S1616.77 27276 Manipulation, Hyb. John, Requiring General Ameritang S1616.77 27277 Indiana Sarchitan S1616.77 27276 Indiana Sarchitan S1616.77 27277 Indiana Sarchitan S1616.77 27278 Indiana Sarchitan S1616.77 27278 Indiana Sarchitan S1616.77 27279 Indiana S1616.77 27280 Ind			
27286 Closed Treatment Of Poet Hip Anthropises Dislocation, Requiring Regional Or General Anesthesia \$127287 Closed Treatment Of Ferroral Fracture, Proximal End, Head; With Manipulation \$27278 Closed Treatment Of Ferroral Fracture, Proximal End, Head; With Manipulation \$12280 (Dipon Treatment Of Ferroral Fracture, Proximal End, Head; Michael Internal Foxation, When Performed \$12282 (2020) (Part Treatment Of Ferroral Fracture, Proximal End, Head; Anthropised Internal Foxation, When Performed \$12282 (2022) (Part Treatment Of Ferroral Fracture, Proximal End, Head; Anthropised Internal Foxation, When Performed \$12272 (Part Treatment Of Ferroral Fracture, Proximal End, Head; Anthropised Closed (Part Treatment Of Ferroral Proximal			
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27206 Ciosed Treatment OF Femoral Fracture, Proximal End, Head, Wild Manipulation \$1,283.98 27276 Manipulation, Hip Joint, Regularing General Ancesthesia \$1,883.98 27276 Fusion OF Peter Joint Footing Treature, Proximal End, Head, Includes Internal Pixelon, When Performed \$1,283.98 272776 Fusion OF Peter Joint Footing Treature, Proximal End, Head, Includes Internal Pixelon, When Performed \$1,283.98 27278 Fusion OF Peter Joint Footing Joint Ingritud Using Imaging Guidance \$10,728.64 27279 Fusion Garcialiae, Joint Through The Skin Or Minimally Invasive Using Image Guidance \$1,200.02 27280 Fusion Of Joint Between Public Bones \$794.55 27280 Fusion Of Joint Between Public Bones \$794.55 27280 Fusion Of Hip Joint White Incision Or Partial Removal Of Thigh Bone Below Neck \$1,475.55 27280 Interpolational Ampublish Infrared Ampublishin Or Hamber			
27286 Dogen Treatment Of Femoral Fracture, Proximal End, Head, Includes Internal Fixation, When Performed \$1,263.59 27276 Tustion Of Pelvic, Joint Including General Annesbresia \$10,726.64 27276 Tustion Of Pelvic, Joint Including Joint Implant Using Imaging Guidance \$10,726.64 27280 Fusion Of Sacroliac, Joint Thompson, The Stan Or Minnagh Invasive Using Image Guidance \$1,200.00 27280 Fusion Of Sacroliac, Joint Chotalming Bone Graft Open Procedure \$1,200.00 27286 Fusion Of Hip, Joint Vitti Incision Or Partial Removal Of Thigh Bone Below Nock \$1,476.52 27286 Fusion Of Hip, Joint Vitti Incision Or Partial Removal Of Thigh Bone Below Nock \$1,476.52 27290 Interpolviolational Ampustion (Hind Quarter Amputation) \$1,465.61 27290 Indistant Ampustion Of Hip Joint \$1,476.52 27290 Indistant Ampustion Of Hip Joint Proceedings of Hip Joint \$1,476.52 27290 Indistant Of Hip Joint \$1,476.52 27290 Indistant Of Hip Joint Proceedings of Hip Joi		· ·	
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27280 Fusion OT Sacroliac Joint Obtaining Bone Graft Open Procedure \$1,200.02 27286 Fusion OT Hip Joint With Incision Or Partial Removal OT Thigh Bone Below Neck \$1,441.67 27286 Fusion OT Hip Joint With Incision Or Partial Removal OT Thigh Bone Below Neck \$1,478.52 27296 Interpolviabdominal Amputation (Hird Quarter Amputation) \$1,465.61 27298 Destroitation OT Hip Joint With Incision Or Partial Removal OT Thigh Bone Below Neck \$1,287.51 27298 Destroitation OT Hip Joint Price Ply Report \$1,2729 27298 Destroitation OT Hip Joint Price Ply Report \$1,2729 27298 Destroitation OT Hip Joint Price Ply Report \$1,2729 27299 Incision And Drainage, Deep Abscess, Bursa, Or Hematoma, Thigh Or Knee Region \$4,618.81 27200 Incision And Drisnage, Deep Abscess, Bursa, Or Hematoma, Thigh Or Knee Region \$4,618.81 27200 Incision Of Tissue At Thing Or Knee Region, Deep Procedure \$4,449.82 27200 Incision Of Tissue At Thing Or Knee Region, Deep Procedure \$4,449.82 27201 Incision Of Tissue At Thing Or Knee Region \$1,649.82 27202 Removal Of Tissue At Thing Or Knee Region \$1,649.82 27203 Incision Of Timp Or Knee Region \$1,649.82 27204 Exploration, Drisnage, Or Removal Of Foreign Body in Knee Joint \$1,529.22 27204 Subject on Thing Or Knee Region Tissue, Deep \$1,729.83 27205 Removal Of Thigh Or Knee Region Tissue, Deep \$1,729.83 27206 Removal Of Thigh Or Knee Region Tissue, Deep \$1,729.83 27206 Removal Of Thigh Or Knee Region Tissue, Deep \$1,729.83 27207 Excision, Tumor, Soff Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 3 Cm \$1,811.82 27208 Removal Of Knee Joint Liming, Front Or Reach Region More \$1,820.82 27219 Excision, Tumor, Soff Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm \$1,820.82 27220 Removal Of Knee Joint Liming, Front Or Back Area \$1,820.82 27231 Removal Of Knee Joint Liming, Front Or Back Area \$1,820.82 27232 Removal Of Knee Joint Liming, Front Or B			\$10,728.64
27222 Suison Of Joint Between Public Bores \$784.55 27228 Fuison Of Ir Hy. Joint With Incision Or Partial Removal Of Thigh Bone Below Neck \$1.478.55 27228 Distance Michael Borna \$1.466.55 27229 Distance Michael Borna \$1.466.55 27229 Distance Michael Borna \$1.466.55 27229 Distance Michael Borna \$1.466.55 27220 Distance Michael Borna \$1.466.55 27230 Distance Michael Borna \$1.466	27279	Fusion Sacroiliac Joint Through The Skin Or Minimally Invasive Using Image Guidance	\$613.08
27222 Suison Of Joint Between Public Bores \$784.55 27228 Fuison Of Ir Hy. Joint With Incision Or Partial Removal Of Thigh Bone Below Neck \$1.478.55 27228 Distance Michael Borna \$1.466.55 27229 Distance Michael Borna \$1.466.55 27229 Distance Michael Borna \$1.466.55 27229 Distance Michael Borna \$1.466.55 27220 Distance Michael Borna \$1.466.55 27230 Distance Michael Borna \$1.466	27280	Fusion Of Sacroiliac Joint Obtaining Bone Graft Open Procedure	\$1,200.02
27286 Susion Of Hip Joint With Incision Or Partial Removal Of Thigh Bone Below Neck			\$784.55
27286 F. Usion Of H. Julint With Incision Or Partial Removal Of Thigh Bone Below Neck \$1.486.5 27280 Interpretation of High \$1.486.5 27282 D. Interpretation of High \$1.286.1 27283 D. Interpretation of High \$1.286.1 27293 D. Interpretation of High \$1.286.1 27293 D. Interpretation of High \$1.286.1 27303 Incision And Drainago, Deep Abscess. Bursa. Or Hematoma, Thigh Or Knee Region \$461.8 27303 Incision Or Deep, With Opening Of Bone Cortex, Femur Or Knee (Eg., Osteomyellos Or Bone Abscess) \$575.8 27303 Incision Or Treador Of Thigh Or Hematring Muscles. Accessed Through The Skin \$444.9 27306 Incision Of Multiple Tendons Of Thigh Or Hematring Muscles. Accessed Through The Skin \$575.2 27310 Exploration, Drainago, Or Removal Of Foreign Body in Kinee Joint \$758.2 27321 Exploration, Drainago, Or Removal Of Foreign Body in Kinee Joint \$578.2 27323 Exploration, Drainago, Or Removal of Foreign Body in Kinee Joint \$578.2 27323 Exploration, Drainago, Or Removal of Locate States and Accessed Through The Skin \$578.2 27323 Exploration, Drainago, Or Removal of Locate States and Accessed Through The Skin \$579.2 2732 Exploration, Drainago, Or Removal of Every Exploration States and Accessed Through Through Contraction States and			\$1,441.67
127200 Interpelviabdominal Amputation (Firind Quarter Amputation) \$1.465.61		·	
\$1,261,141		·	
27293 [Unisted Procedure, Pelvis Or Hip Joint Price By Repor 27301 [Incision, And Drainage, Deep Abscess, Bursa, Or Hernatoma, Thigh Or Knee Region \$461.85 27303 [Incision, Deep, With Opening Of Bone Cortex, Femur Or Knee (Eg., Osteomyellis Or Bone Abscess) \$575.86 27305 [Removal Of Tissue At Thigh Or Knee Region, Open Procedure \$444.99 27305 [Removal Of Tissue At Thigh Or Knee Region, Open Procedure \$261.81 27305 [Removal Of Tissue At Thigh Or Knee Region, Open Procedure \$261.81 27307 [Incision Of Multiple Tenden Soft Thigh Or Hematring Muscles, Accessed Through The Skin \$262.72 27307 [Incision Of Multiple Tenden Soft Thigh Or Knee Region Tissue, Superficial \$260.55 27324 [Stopsy Of Thigh Or Knee Region Tissue, Superficial \$260.55 27325 [Neurectorny, Popileal (Sastronemius) \$372.82 27326 [Neurectorny, Popileal (Sastronemius) \$482.41 27327 [Neurectorny, Popileal (Sastronemius) \$482.41 27328 [Neurectorny, Popileal (Sastronemius) \$482.41 27329 [Neurectorny, Popileal (Sastronemius) \$482.41 27320 [Articorn, Inforeactorny, Popileal (Sastronemius) \$482.41 27321 [Neurectorny, Popileal (Sastronemius) \$482.42 27322 [Neurectorny, Popileal (Sastronemius)			+ /
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27303 Incision, Deep, With Opening Of Bone Cortex, Fernur Or Knee (Eg., Osteomyelitis Or Bone Abscess) \$575.88 27306 Removal Of Tissue At Thigh Or Knee Region, Open Procedure \$444.99 27306 Incision Of Indication Of Thigh Or Hamstring Muscles, Accessed Through The Skin \$325.11 27307 Incision Of Multiple Tendons Of Thigh Or Hamstring Muscles, Accessed Through The Skin \$392.25 27307 Incision Of Multiple Tendons Of Thigh Or Hamstring Muscles, Accessed Through The Skin \$392.25 27308 Incision Of Multiple Tendons Of Thigh Or Knee Region Tissue, Superficial \$260.55 27324 Blopsy Of Thigh Or Knee Region Tissue, Deep \$357.88 27325 Neurectomy, Popilized (Sastrocnemius) \$520.05 27326 Neurectomy, Popilized (Sastrocnemius) \$482.41 27327 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 3 Cm \$351.62 27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm \$354.62 27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm \$354.62 27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 3 Cm \$359.52 27330 Arthrotorny, Knee; With Suproval Blopsy Only \$390.22 27331 Exploration, Biospy, Or Removal Of Lose Of Forigin Body Of Knee \$352.52 <t< td=""><td></td><td></td><td></td></t<>			
27306 Removal Of Tissue At Thigh Or Knee Region, Open Procedure \$244.59			
27306 [Incision Of Tendon Of Thigh Of Hamstring Muscles, Accessed Through The Skin \$392.22 27307 [Incision Of Hullple Tendons Of Thigh Of Hamstring Muscles, Accessed Through The Skin \$758.32 27307 [Incision Of Mullple Tendons Of Thigh Of Name (Hamstring Muscles) \$758.32 27323 [Biopsy Of Thigh Of Knee Region Tissue, Superficial \$200.56 27324 [Slopsy Of Thigh Of Knee Region Tissue, Deep \$377.32 27325 [Neurectorny, Popifical (Sastrocnemius) \$520.06 27326 [Neurectorny, Popifical (Sastrocnemius) \$520.06 27327 [Neurectorny, Popifical (Sastrocnemius) \$520.06 27328 [Neurectorny, Neure, With Synoval Blopsy Of Neurons (Neurectorny, Neurectorny, Neurectorny, Neurectorny, Neurectorny, Neurectorny, Neurons (Neurons) \$520.26			
27301 Exboration, Orl Multiple Tendons Of Thigh Or Hamstring Muscles, Accessed Through The Skin 27322 Bibpsy Of Thigh Or Removal Of Preingin Body in Knee Joint 27323 Bibpsy Of Thigh Or Knee Region Tissue, Superficial 27324 Bibpsy Of Thigh Or Knee Region Tissue, Deep 27325 Neuroctomy, Hamstring Muscle 27326 Neuroctomy, Hamstring Muscle 27327 Existion, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 3 Cm 27327 Existion, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 3 Cm 27327 Existion, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm 27328 Existion, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm 27329 Existion, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm 27320 Removal (Less Than 5 Centimeters) Tissue Growth Of Thigh Or Knee 27331 Exploration, Biopsy, Or Removal Of Losse Or Foreign Body Of Knee 27331 Exploration, Biopsy, Or Removal Of Losse Or Foreign Body Of Knee 27332 Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint 27333 Removal Of Knee Joint Lining, Front Or Back 27334 Removal Of Knee Joint Lining, Front And Back 27336 Removal Of Knee Joint Lining, Front And Back 27336 Exploration, With Synovectomy, Knee; S Cm Or Greater 27340 Existion Prepatellar Busa 27340 Existion Prepatellar Busa 27340 Patelocumy, With Synovectomy, Knee; S Cm Or Greater 27340 Existion Or Cuertage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft (Includes Obtaining Graft) 27340 Existion Or Cuertage Of Bone Cyst Or Benign Tumor Of Femur, With Homogenous Graft (Includes Obtaining Graft) 27355 Existion Or Cuertage Of Bone Cyst Or Benign Tumor Of Femur, With Homogenous Graft (Includes Obtaining Graft) 2736 Patelocomy Or Hemipatellectomy 27370 Patelocomy Orl Hemipatellectomy 27380 Patelocomy Orl Hemipatellectomy 27390 Patelocomy Orl Hemipatellectomy 27390 Patelocomy Orl Hemipatellectomy 27390 Patelocomy Orl Hemipatellectomy 27390 Patelocomy Orl Hemipatellectomy 2739		ů i	
27313 Exploration, Drainage, Or Removal Of Foreign Body In Knee Joint \$758.35		ů ů ů	
\$260,55 Sample \$260,55 S	27307	Incision Of Multiple Tendons Of Thigh Or Hamstring Muscles, Accessed Through The Skin	\$392.29
\$372.98 Sevencetomy, Hamstring Muscle \$52.06 \$52.	27310	Exploration, Drainage, Or Removal Of Foreign Body In Knee Joint	\$758.35
S220.05	27323	Biopsy Of Thigh Or Knee Region Tissue, Superficial	\$260.58
S482.41	27324	Biopsy Of Thigh Or Knee Region Tissue, Deep	\$372.98
27327 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 3 Cm \$351.62 27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm \$564.88 27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm \$393.53 27329 Removal (Less Than 5 Centimeters) Tissue Growth Of Thigh Or Knee \$393.53 27331 Exploration, Biopsy, Or Removal Of Lose Or Foreign Body Of Knee \$488.00 27332 Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint \$522.52 27333 Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint \$541.82 27334 Removal Of Knee Loint Lining, Front And Back \$699.62 27335 Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater \$43.01 27340 Excision, Prepatellar Bursa \$329.93 27345 Excision Of Lesion Of Meniscus Or Capsule (Eg. Cyst, Canglion), Knee \$526.24 27350 Patellectomy Or Hemptalelicotomy \$667.52 27355 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft (Includes Obtaining Graft) \$678.34 27356 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft (Includes Obtaining Graft) \$783.42 27358 Patellectomy Or Hemptalelicctomy \$622.25 27356 Excision	27325	Neurectomy, Hamstring Muscle	\$520.09
27327 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 3 Cm \$351.62 27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm \$564.88 27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm \$393.53 27329 Removal (Less Than 5 Centimeters) Tissue Growth Of Thigh Or Knee \$393.53 27331 Exploration, Biopsy, Or Removal Of Lose Or Foreign Body Of Knee \$488.00 27332 Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint \$522.52 27333 Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint \$541.82 27334 Removal Of Knee Loint Lining, Front And Back \$699.62 27335 Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater \$43.01 27340 Excision, Prepatellar Bursa \$329.93 27345 Excision Of Lesion Of Meniscus Or Capsule (Eg. Cyst, Canglion), Knee \$526.24 27350 Patellectomy Or Hemptalelicotomy \$667.52 27355 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft (Includes Obtaining Graft) \$678.34 27356 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft (Includes Obtaining Graft) \$783.42 27358 Patellectomy Or Hemptalelicctomy \$622.25 27356 Excision	27326	Neurectomy, Popliteal (Gastrocnemius)	\$482.41
27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subtascial (Eg. Intramuscular); Less Than 5 Cm \$564.88 27329 Removal (Less Than 5 Centimeters) Tissue Growth Of Thigh Or Knee \$393.53 27330 Arhrotomy, Knee; With Synovial Biopsy Only \$390.22 27331 Exploration, Biopsy, Or Removal Of Loose Or Foreign Body Of Knee \$488.00 27332 Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint \$541.82 27333 Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint \$541.82 27334 Removal Of Knee Joint Lining, Front Or Back \$698.52 87358, Removal Of Knee Joint Lining, Front And Back \$699.62 27337 Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater \$443.01 27339 Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater \$433.01 27340 Excision, Prepatellar Bursa \$329.93 27341 Excision Of Lesion Of Memiscus Or Capsule (Eg. Cyst, Ganglion), Knee \$562.22 27355 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft (Includes Obtaining Graft) \$667.53 2735E Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft (Includes Obtaining Graft) \$783.42 2735E Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) \$786.42<			\$351.62
27329 Removal (Less Than 5 Centimeters) Tissue Growth Of Thigh Or Knee \$935.36 27330 Arthrotomy, Knee; With Sprovial Biopsy Only \$390.22 27331 Exploration, Biopsy, Or Removal Of Lose Or Foreign Body Of Knee \$488.00 27332 Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint \$525.25 27333 Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint \$524.52 27334 Removal Of Knee Joint Lining, Front Or Back \$698.55 27335 Removal Of Knee Joint Lining, Front And Back \$698.55 27336 Removal Of Knee Joint Lining, Front And Back \$698.56 27337 Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater \$789.01 27334 Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater \$789.01 27345 Removal Of Cyst Of Membrane Covering Behind Knee Joint \$448.04 27346 Removal Of Cyst Of Membrane Covering Behind Knee Joint \$448.04 27345 Removal Of Cyst Of Membrane Covering Behind Knee Joint \$448.04 27346 Removal Of Cyst Of Membrane Covering Behind Knee Joint \$448.04 27356 Exision Or Liveritage Of Bene Cyst Or Be		, , ,	
27330 Arthrotomy, Knee; With Synovial Biopsy Only \$390.25 27331 Exploration, Biopsy, Or Removal Of Loose Or Foreign Body Of Knee \$488.00 27332 Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint \$592.55 27333 Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint \$541.82 27334 Removal Of Knee Joint Lining, Front Or Back \$698.55 27335 Removal Of Knee Joint Lining, Front And Back \$699.62 27337 Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater \$443.01 27339 Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater \$798.01 27340 Excision, Prepatellar Bursa \$329.93 27345 Removal Of Cyst Of Membrane Covering Behind Knee Joint \$443.01 27346 Excision Of Cyst Of Membrane Covering Behind Knee Joint \$326.24 27355 Excision Or Curettage Of Meniscus Or Capsule (Eg., Cyst, Ganglion), Knee \$526.24 27355 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; \$667.52 27355 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) \$783.42 2			*
27331 Exploration, Biopsy, Or Removal Of Loose Or Foreign Body Of Knee \$488.00 27332 Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint \$592.55 27333 Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint \$581.82 27334 Removal Of Knee Joint Lining, Front Or Back \$698.55 27335 Removal Of Knee Joint Lining, Front And Back \$699.62 27337 Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater \$798.01 27339 Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater \$798.01 27340 Excision, Prepatellar Bursa \$329.93 27345 Excision Or Lesion Of Membrane Covering Behind Knee Joint \$448.00 27340 Excision Of Lesion Of Membrane Covering Behind Knee Joint \$448.00 27341 Excision Of Lesion Of Membrane Covering Behind Knee Joint \$448.00 27342 Excision Of Lesion Of Membrane Covering Behind Knee Joint \$448.00 27345 Excision Of Lesion Of Membrane Covering Behind Knee Joint \$667.53 27350 Patellectomy Or Hemipatellectomy \$667.53 27352 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; W		· · ·	
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27333 Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint \$541.82 27334 Removal Of Knee Joint Lining, Front Or Back \$698.52 27337 Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater \$443.01 27339 Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater \$443.01 27340 Excision, Prepatellar Bursa \$329.93 27345 Removal Of Lesion Of Meniscus Or Capsule (Eg. Cyst, Ganglion), Knee \$262.24 27350 Patellectomy Or Hemipatellectomy \$667.53 27355 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; \$622.25 27356 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft \$676.57 27356 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) \$783.42 27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) \$244.22 27358 Excision Or Cratetage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) \$244.22 27358 Excision Or Cratetage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code			
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27337 Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater \$443.01 27339 Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater \$798.01 27340 Excision, Prepatellar Bursa \$329.93 27345 Removal Of Cyst Of Membrane Covering Behind Knee Joint \$3488.04 27347 Excision Of Lesion Of Memiscus Or Capsule (Eg, Cyst, Ganglion), Knee \$526.24 27350 Patellectomy Or Hemipatellectomy \$667.53 27355 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft \$676.57 27357 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft (Includes Obtaining Graft) \$783.42 27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) \$783.42 27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) \$244.29 27360 Abscess) \$756.44 27361 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee \$1,554.74 27362 Radical Resection Of Tumor, Femur Or Knee \$1,738.90 27363 Injection Of Contrast For Imaging Of Knee Joint \$1,738.90 27372 Removal Foreign Body, Deep \$1,255.72 27383 Suture Of Tendon Below Knee, Primary \$639.94 27381 Suture Of Tendon Below Knee, Secondary Reconstruction \$839.94 27383 Suture Of Ruptured Muscle Of Thigh, Primary \$839.94 27384 Suture Of Ruptured Muscle Of Thigh, Secondary \$839.94 27385 Repair Of Hultiple Hamstring Tendon, Open Procedure \$852.44 27386 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure \$852.44			\$592.59 \$541.82
27339 Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater \$798.01 Excision, Prepatellar Bursa \$329.93 Excision, Prepatellar Bursa \$329.93 Excision, Or Cyst Of Membrane Covering Behind Knee Joint \$448.04 \$27347 Excision Of Lesion Of Meniscus Or Capsule (Eg., Cyst, Ganglion), Knee \$526.24 \$27350 Patellectomy Or Hemipatellectomy \$667.53 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; \$667.53 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft \$676.57 \$27355 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) \$783.42 \$27356 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) \$244.25 Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg., Osteomyelitis Or Bone Abscess) \$756.44 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee \$1,554.74 \$27368 Radical Resection Of Tumor, Femur Or Knee \$1,554.74 \$27369 Injection Of Contrast For Imaging Of Knee Joint \$125.76 Radical Resection Of Tumor, Femur Or Knee \$1,738.90 Suture Of Tendon Below Knee, Primary \$839.94 \$27385 Suture Of Tendon Below Knee, Primary \$839.94 \$27385 Suture Of Ruptured Muscle Of Thigh, Primary \$839.94 \$27385 Suture Of Ruptured Muscle Of Thigh, Primary \$839.94 \$27385 Suture Of Ruptured Muscle Of Thigh, Primary \$839.94 \$27387 Repair Of Humstring Tendons, Open Procedure \$839.95 Repair Of Multiple Hamstring Tendons, Open Procedure \$839.95 Repair Of Multiple Hamstring Tendons, Open Procedure \$839.95 Repair Of Multiple Hamstring Tendons, Open Procedure \$850.24 \$27387 Repair Of Multiple Hamstring Tendons, Open Procedure \$850.24 \$27392 Repair Of Multiple Hamstring Tendons, Open Procedure \$850.24 \$27392 Repair Of Multiple Hamstring Tendons, Open Procedure \$850.24 \$27392 Repair Of Multiple Hamstring Tendons, Open Procedure \$850.24 \$250.25 Repair Of Multiple Hamstring Tendons, Open Procedure \$850.24 \$250.25 R	27334	Removal Of Knee Joint Lining, Front Or Back	\$592.59 \$541.82 \$698.59
Excision, Prepatellar Bursa \$329.93 27345 Removal Of Cyst Of Membrane Covering Behind Knee Joint \$448.04 27347 Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee \$526.24 27350 Patellectomy Or Hemipatellectomy \$667.52 27355 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; \$622.25 27356 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft \$676.57 27357 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) \$783.42 27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) \$244.29 Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone \$756.44 27364 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee \$1,738.90 27369 Injection Of Contrast For Imaging Of Knee Joint \$125.76 27372 Removal Foreign Body, Deep \$411.33 27380 Suture Of Tendon Below Knee, Primary \$639.42 27381 Suture Of Tendon Below Knee, Secondary Reconstruction \$890.28 27385 Suture Of Ruptured Muscle Of Thigh, Primary \$628.71 27396 Repair Of Humstring Tendons, Open Procedure \$512.76 27397 Repair Of Humstring Tendons, Open Procedure \$512.76 27398 Repair Of Multiple Hamstring Tendons, Open Procedure	27334 27335	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back	\$592.59 \$541.82 \$698.59 \$699.62
Removal Of Cyst Of Membrane Covering Behind Knee Joint \$448.04	27334 27335 27337	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01
Excision Of Lesion Of Meniscus Or Capsule (Eg. Cyst, Ganglion), Knee \$526.24	27334 27335 27337 27339	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01
Excision Of Lesion Of Meniscus Or Capsule (Eg. Cyst, Ganglion), Knee \$526.24	27334 27335 27337 27339	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01
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27356 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft 27357 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) 27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) 27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) 27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) 27360 Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone 27361 Abscess) 27364 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee 27365 Radical Resection Of Tumor, Femur Or Knee 27366 Radical Resection Of Tumor, Femur Or Knee 27367 Removal Foreign Body, Deep 2737 Removal Foreign Body, Deep 27380 Suture Of Tendon Below Knee, Primary 27380 Suture Of Tendon Below Knee, Secondary Reconstruction 27385 Suture Of Ruptured Muscle Of Thigh, Primary 27386 Suture Of Ruptured Muscle Of Thigh, Secondary 27386 Suture Of Ruptured Muscle Of Thigh, Secondary 27387 Repair Of Humstring Tendon, Open Procedure 27390 Repair Of Multiple Hamstring Tendons, Open Procedure 27391 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure 27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure	27334 27335 27337 27339 27340 27345 27347	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93
27357Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)\$783.4227358Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure)\$244.29Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone)\$756.4427360Abscess)\$756.4427361Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee)\$1,554.7427362Radical Resection Of Tumor, Femur Or Knee\$1,738.9027363Injection Of Contrast For Imaging Of Knee Joint\$125.7827372Removal Foreign Body, Deep\$411.3327380Suture Of Tendon Below Knee, Primary\$639.9427381Suture Of Tendon Below Knee, Secondary Reconstruction\$890.2627385Suture Of Ruptured Muscle Of Thigh, Primary\$628.7127386Suture Of Ruptured Muscle Of Thigh, Secondary\$791.5327380Repair Of Hamstring Tendon, Open Procedure\$392.9227391Repair Of Multiple Hamstring Tendons, Open Procedure\$512.7627392Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure\$652.44	27334 27335 27337 27339 27340 27345 27347 27350	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$448.04 \$526.24 \$667.53
27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone 27360 Abscess) \$756.44 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee 27365 Radical Resection Of Tumor, Femur Or Knee 27369 Injection Of Contrast For Imaging Of Knee Joint 27372 Removal Foreign Body, Deep 27380 Suture Of Tendon Below Knee, Primary 27380 Suture Of Tendon Below Knee, Secondary Reconstruction 27385 Suture Of Ruptured Muscle Of Thigh, Primary 27386 Suture Of Ruptured Muscle Of Thigh, Secondary 27380 Suture Of Ruptured Muscle Of Thigh, Secondary 27380 Repair Of Hamstring Tendon, Open Procedure 27391 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure 27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure 27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure	27334 27335 27337 27339 27340 27345 27347 27350 27355	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur;	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$448.04 \$526.24 \$667.53
Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone \$756.44 Abscess) \$756.44 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee \$1,554.74 Abscess) \$1,554.74 Abscess Radical Resection Of Tumor, Femur Or Knee \$1,738.90 Injection Of Contrast For Imaging Of Knee Joint \$125.78 Removal Foreign Body, Deep \$1,738.90 Suture Of Tendon Below Knee, Primary \$411.33 Suture Of Tendon Below Knee, Primary \$639.94 Suture Of Tendon Below Knee, Secondary Reconstruction \$890.28 Suture Of Ruptured Muscle Of Thigh, Primary \$638.71 Suture Of Ruptured Muscle Of Thigh, Primary \$638.71 Suture Of Ruptured Muscle Of Thigh, Secondary \$791.53 Repair Of Hamstring Tendon, Open Procedure \$392.99 Repair Of Multiple Hamstring Tendons, Open Procedure \$5512.76 Secondary Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure \$5512.76 Secondary	27334 27335 27337 27339 27340 27345 27350 27355 27356	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$448.04 \$526.24 \$667.53 \$622.25
Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone \$756.44 Abscess) \$756.44 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee \$1,554.74 Abscess) \$1,554.74 Abscess Radical Resection Of Tumor, Femur Or Knee \$1,738.90 Injection Of Contrast For Imaging Of Knee Joint \$125.78 Removal Foreign Body, Deep \$1,738.90 Suture Of Tendon Below Knee, Primary \$411.33 Suture Of Tendon Below Knee, Primary \$639.94 Suture Of Tendon Below Knee, Secondary Reconstruction \$890.28 Suture Of Ruptured Muscle Of Thigh, Primary \$638.71 Suture Of Ruptured Muscle Of Thigh, Primary \$638.71 Suture Of Ruptured Muscle Of Thigh, Secondary \$791.53 Repair Of Hamstring Tendon, Open Procedure \$392.99 Repair Of Multiple Hamstring Tendons, Open Procedure \$5512.76 Secondary Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure \$5512.76 Secondary	27334 27335 27337 27339 27340 27345 27350 27355 27356	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$448.04 \$526.24 \$667.53
27360 Abscess) \$756.44 27364 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee \$1,554.74 27365 Radical Resection Of Tumor, Femur Or Knee \$1,738.90 27369 Injection Of Contrast For Imaging Of Knee Joint \$125.78 27372 Removal Foreign Body, Deep \$411.33 27380 Suture Of Tendon Below Knee, Primary \$639.94 27381 Suture Of Tendon Below Knee, Secondary Reconstruction \$890.28 27385 Suture Of Ruptured Muscle Of Thigh, Primary \$628.71 27386 Suture Of Ruptured Muscle Of Thigh, Secondary \$791.53 27390 Repair Of Hamstring Tendon, Open Procedure \$392.99 27391 Repair Of Multiple Hamstring Tendons, Open Procedure \$512.76 27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure \$652.44	27334 27335 27337 27339 27340 27345 27350 27355 27356	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$448.04 \$526.24 \$667.53 \$622.25 \$676.57
27364 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee \$1,554.74 27365 Radical Resection Of Tumor, Femur Or Knee \$1,738.90 27369 Injection Of Contrast For Imaging Of Knee Joint \$125.78 27372 Removal Foreign Body, Deep \$411.33 27380 Suture Of Tendon Below Knee, Primary \$639.94 27381 Suture Of Tendon Below Knee, Secondary Reconstruction \$890.28 27385 Suture Of Ruptured Muscle Of Thigh, Primary \$628.71 27386 Suture Of Ruptured Muscle Of Thigh, Secondary \$791.53 27390 Repair Of Hamstring Tendon, Open Procedure \$392.92 27391 Repair Of Multiple Hamstring Tendons, Open Procedure \$512.76 27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure \$652.44	27334 27335 27337 27339 27340 27345 27350 27355 27356	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Excision, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure)	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$448.04 \$526.24 \$667.53 \$622.25
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27369 Injection Of Contrast For Imaging Of Knee Joint \$125.78 27372 Removal Foreign Body, Deep \$411.33 27380 Suture Of Tendon Below Knee, Primary \$639.94 27381 Suture Of Tendon Below Knee, Secondary Reconstruction \$890.26 27385 Suture Of Ruptured Muscle Of Thigh, Primary \$628.71 27386 Suture Of Ruptured Muscle Of Thigh, Secondary \$791.53 27390 Repair Of Hamstring Tendon, Open Procedure \$392.92 27391 Repair Of Multiple Hamstring Tendons, Open Procedure \$512.76 27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure \$652.44	27334 27335 27337 27339 27340 27345 27355 27356 27357 27358	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess)	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$448.04 \$526.24 \$667.53 \$622.25 \$676.57 \$783.42 \$244.29
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27380Suture Of Tendon Below Knee, Primary\$639.9427381Suture Of Tendon Below Knee, Secondary Reconstruction\$890.2827385Suture Of Ruptured Muscle Of Thigh, Primary\$628.7127386Suture Of Ruptured Muscle Of Thigh, Secondary\$791.5327390Repair Of Hamstring Tendon, Open Procedure\$392.9927391Repair Of Multiple Hamstring Tendons, Open Procedure\$512.7627392Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure\$652.44	27334 27335 27337 27339 27340 27345 27355 27356 27357 27358 27364 27364	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee Radical Resection Of Tumor, Femur Or Knee	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$448.04 \$526.24 \$667.53 \$622.25 \$676.57 \$783.42 \$244.29
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27386Suture Of Ruptured Muscle Of Thigh, Secondary\$791.5327390Repair Of Hamstring Tendon, Open Procedure\$392.9327391Repair Of Multiple Hamstring Tendons, Open Procedure\$512.7627392Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure\$652.44	27334 27335 27337 27340 27345 27347 27350 27355 27356 27356 27364 27364 27369 27372 27380	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Excision, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee Radical Resection Of Tumor, Femur Or Knee Injection Of Contrast For Imaging Of Knee Joint Removal Foreign Body, Deep Suture Of Tendon Below Knee, Primary	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$4448.04 \$526.24 \$667.53 \$622.25 \$676.57 \$783.42 \$244.29 \$756.44 \$1,554.74 \$1,738.90 \$125.78 \$411.33
27390 Repair Of Hamstring Tendon, Open Procedure\$392.9827391 Repair Of Multiple Hamstring Tendons, Open Procedure\$512.7627392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure\$652.44	27334 27335 27337 27340 27345 27345 27355 27356 27357 27358 27364 27364 27365 27369 27362 27362 27380	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg., Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee Radical Resection Of Tumor, Femur Or Knee Injection Of Contrast For Imaging Of Knee Joint Removal Foreign Body, Deep Suture Of Tendon Below Knee, Primary Suture Of Tendon Below Knee, Secondary Reconstruction	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$778.01 \$3229.93 \$448.04 \$526.24 \$667.53 \$622.25 \$676.57 \$783.42 \$244.29 \$756.44 \$1,554.74 \$1,738.90 \$125.78 \$411.33
27391Repair Of Multiple Hamstring Tendons, Open Procedure\$512.7627392Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure\$652.44	27334 27335 27337 27340 27345 27345 27355 27356 27356 27356 27364 27369 27369 273780 27381 27381	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee Radical Resection Of Tumor, Femur Or Knee Injection Of Contrast For Imaging Of Knee Joint Removal Foreign Body, Deep Suture Of Tendon Below Knee, Primary Suture Of Tendon Below Knee, Secondary Reconstruction Suture Of Ruptured Muscle Of Thigh, Primary	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$448.04 \$526.24 \$667.53 \$622.25 \$676.57 \$783.42 \$244.29 \$756.44 \$1,554.74 \$1,738.90 \$125.78 \$411.33 \$639.94 \$890.28
27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure \$652.44	27334 27335 27337 27339 27340 27345 27345 27355 27356 27356 27364 27365 27369 27372 27380 27385 27385	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee Radical Resection Of Tumor, Femur Or Knee Injection Of Contrast For Imaging Of Knee Joint Removal Foreign Body, Deep Suture Of Tendon Below Knee, Primary Suture Of Tendon Below Knee, Secondary Reconstruction Suture Of Ruptured Muscle Of Thigh, Primary Suture Of Ruptured Muscle Of Thigh, Secondary	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$448.04 \$526.24 \$667.53 \$622.25 \$676.57 \$783.42 \$244.29 \$756.44 \$1,554.74 \$1,738.90 \$125.78 \$411.33 \$639.94 \$890.28 \$628.71
	27334 27335 27337 27339 27340 27345 27355 27356 27356 27356 27364 27365 27369 27372 27380 27385 27380 27380	Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee Radical Resection Of Tumor, Femur Or Knee Injection Of Contrast For Imaging Of Knee Joint Removal Foreign Body, Deep Suture Of Tendon Below Knee, Primary Suture Of Tendon Below Knee, Primary Suture Of Tendon Below Knee, Secondary Reconstruction Suture Of Ruptured Muscle Of Thigh, Primary Suture Of Ruptured Muscle Of Thigh, Secondary Repair Of Hamstring Tendon, Open Procedure	\$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$448.04 \$526.24 \$667.53 \$622.25 \$676.57 \$783.42 \$244.29 \$756.44 \$1,554.74 \$1,738.90 \$125.78 \$411.33 \$639.94 \$890.28 \$628.71 \$791.53
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23256 Langement Of Henderich Tunder Kulliple Tendores, Bilateral 23266 Tampager Of Transfer (With Macch Reallescon Or Rerowing), Traigh (E., Estensor To Flexor); Single Tendore 23267 Trainger Of Transfer (With Macch Reallescon Or Rerowing), Traigh (E., Estensor To Flexor); Single Tendore 23267 Trainger Of Transfer (With Macch Reallescon Or Rerowing), Traigh (E., Estensor To Flexor); Single Tendore 23267 Trainger (With Macch Reallescon Or Rerowing), Traigh (E., Estensor To Flexor); Multiple Tendore 23267 Subre, Primary, Tron. Replaced Of Severed Lapiernet, Will Or Willout Menisocotory, Kee, Colusion 23267 Subre, Primary, Tron. Replaced Of Severed Lapiernet, Will Or Willout Menisocotory, Kee, Colusion 2327 Subre, Primary, Tron. Replaced Of Severed Lapiernet, Will Or Willout Menisocotory, Kee, Colusion 2327 Subre, Primary, Tron. Replaced Of Severed Lapiernet, Will Or Willout Menisocotory, Kee, Colusion 2327 Subre, Primary, Tron. Replaced Of Severed Lapiernet, Will Or Willout Menisocotory, Kee, Colusion 2327 Subre, Primary, Tron. Replaced Of Severed Lapiernet, Will Or Willout Menisocotory, Kee, Columnal And Crucials Lapiernetis 2327 Subre, Primary, Tron. Replaced Of Severed Lapiernetis, Will Or Willout Menisocotory, Kee, Columnal And Crucials Lapiernetis 2328 Subre, Primary, Tron. Replaced Of Severed Lapiernetis, Will Or Willout Menisocotory, Kee, Columnal And Crucials Lapiernetis 2329 Subre, Villager Columnal Andread Severed Lapiernetis, Will Or Willout Menisocotory, Kee, Columnal Andread Crucials Lapiernetis, Will Or Willout Menisocotory, Kee, Columnal Andread Crucials Lapiernetis, Will Or Willout Menisocotory, Kee, Columnal Andread Crucials Lapiernetis, Will Or Willout Menisocotory, Kee, Columnal Andread Crucials Lapiernetis, Will Or Keep Lapiernetis, Will Or Willout Menisocotory, Willout Menisoc		Description Lengthening Of Hamstring Tendon: Multiple Tendons, One Leg	Fee \$581.67
2599 Transplant O' Transled (With Mascle Redirection O' Renoung), Tayli (E., Esterant To Flexiv), Major Transler (With Mascle Redirection O' Renoung), Tayli (E., Esterant To Flexiv), Major Transler (With Mascle In Hamilton) 2502 Transplant O' Transler (With Mascle Redirection O' Renoung), Tayli (E., Esterant To Flexiv), Major Transler (S. 2002) 2503 Suina, Primary, Yon, Repland O' Sewered Ligament, With O' Without Meniscectory, Kose Colleteral 2504 Suina, Primary, Yon, Repland O' Sewered Ligament, With O' Without Meniscectory, Kose Colleteral 2505 Suina, Primary, Yon, Repland O' Sewered Ligament, With O' Without Meniscectory, Kose Colleteral 2506 Suina, Primary, Yon, Repland O' Sewered Ligament, With O' Without Meniscectory, Kose Colleteral And Cludde Ligaments 2507 Suina, Primary, Yon, Repland O' Sewered Ligament, With O' Without Meniscectory, Kose Colleteral And Cludde Ligaments 2508 Suina, Primary, Yon, Repland O' Sewered Ligament, With O' Without Meniscectory, Kose Colleteral And Cludde Ligaments 2509 Suina, Primary, Yon, Repland O' Sewered Ligament, With O' Without Meniscectory, Kose Colleteral And Cludde Ligaments 2509 Suina, Primary, Yon, Repland O' Sewered Ligament, With O' Without Meniscectory, Kose Colleteral Ligaments 2509 Suina, Primary, Yon, Repland O' Sewered Ligament, Without Meniscectory, Kose Colleteral Ligaments 2509 Suina, Without Meniscectory, Without Meniscectory, Kose Colleteral Ligaments 2509 Suina, Without Meniscectory,			\$909.68
22021 Transpear Of			\$610.37
27403 Suhrun, Primary, Tom, Ruptured O'Severed Ligament, With O'Without Meniocottomy, Knier, Collateral Sept. 27407 Suhrun, Primary, Tom, Ruptured O'Severed Ligament, With O'Without Meniocottomy, Knier, Collateral And Chuckie Ligaments 27407 Suhrun, Primary, Tom, Ruptured O'Severed Ligament, With O'Without Meniocottomy, Knier, Collateral And Chuckie Ligaments 27407 Suhrun, Primary, Tom, Ruptured O'Severed Ligament, With O'Without Meniocottomy, Knier, Collateral And Chuckie Ligaments 27408 Subrup, Primary, Tom, Ruptured O'Severed Ligament, With O'Without Meniocottomy, Knier, Collateral And Chuckie Ligaments 27408 Subrup Church Churc			\$833.25
27266 Stutue Primary, Torn, Riputard O'S Severed Ligament, With O'Without Meniscoctory, Kose; Collateral 27276 Stutue, Primary, Torn, Riputard O'S Severed Ligament, With O'Without Meniscoctory, Kose; Collateral And Chucate Ligaments 27276 Stutue, Primary, Torn, Riputard O'S Severed Ligament, With O'Without Meniscoctory, Kose; Collateral And Chucate Ligaments 27276 Stutue, Primary, Torn, Riputard O'S Severed Ligament, With O'Without Meniscoctory, Kose; Collateral And Chucate Ligaments 27276 Stutue, Primary, Torn, Riputard O'S Severed Ligament, With O'Without Meniscoctory, Kose; Collateral And Chucate Ligaments 27276 Stutue, Primary, Torn, Riputard Stutue, Carlos, Stutue, Primary, Torn, Riputard	27400	Transfer Of Tendon Or Muscle In Hamstring	\$637.16
27207 Suture, Primary, Tom, Riputured Dr. Severend Ligament, With Dr. Without Merisocotomy, Kone; Chuckete Apr. 27207 Suture, Primary, Tom, Riputured Dr. Severend Ligament, With Dr. Without Merisocotomy, Kone; Chuckete Apr. 27212 Adologous Chronicopy Inspiration, Kone St. 14,865. 27212 Adologous Chronicopy Inspiration, Kone St. 14,865. 27213 Adologous Chronicopy Inspiration, Kone St. 14,865. 27213 Charles Chronicopy Inspiration, Kone St. 14,865. 27213 Charles Chronicopy Chronicopy Inspiration, Kone St. 14,865. 27213 Charles Chronicopy Chronicop	27403	Arthrotomy With Meniscus Repair, Knee	\$657.23
22409 Stutine Primary, Tortin, Rightursd O'S Severed Ligament, With O'Without Meniscentomy, Knee Collateral And Cruciase Ligaments \$14.86. 22115 Implication O'D Dorn's Carillage Cells into Kines Born. Open Procedure \$1.466. 22115 Implication O'D Dorn's Carillage Cells into Kines Born. Open Procedure \$1.466. 22127 Implication O'D Dorn's Carillage Cells into Kines Born. Open Procedure \$1.466. 22127 Implication O'D Hander's Kines Cells (Cells into Kines Born. Open Procedure \$1.466. 22127 Implication O'D Hander's Kines Cells (Cells into Kines Born. Open Procedure \$1.466. 22127 Implication O'D Hander's Kines Cells (Cells into Kines Born. Open Procedure \$2222 Implication Cells (Cells into Kines Born. Open Procedure \$2222 Implication Cells (Cells into Kines Born. Open Procedure \$2222 Implication Cells (Cells into Kines Born. Open Procedure \$2222 Implication Cells (Cells into Kines Born. Open Procedure \$2222 Implication Cells (Cells into Kines Born. Open Procedure \$2222 Implication Cells (Cells into Kines Born. Open Procedure \$2222 Implication Cells (Cells into Kines Born. Open Procedure \$2222 Implication Cells (Cells into Kines Born. Open Procedure \$2222 Implication Cells (Cells into Kines Born. Open Procedure \$2222 Implication Cells (Cells into Kines Born. Open Procedure			\$689.85
27.121 Autorogous Cincertoropte Implantation. Kree Son, Open Procedure			\$777.84
21416 Implantation Of Donn's Cardiage Cells Into Knee Bone, Open Procedure 21416 Implantation Of Patent's Knee Cardiage Cells Into Knee Bone, Open Procedure 3896.1 22418 Amin's Third Tuber-Clephays (Fig. Manyur Type Procedure) 3891.2 22418 Amin's Third Tuber-Clephays (Fig. Manyur Type Procedure) 3891.2 22412 Reconstruction For Recomment Discourage Patentine With Patelletonny 22424 Reconstruction For Recomment Discourage Patentine With Patelletonny 22427 Reconstruction Of Knee Joint Langments, Open Procedure, Inside Or Outside Tries Knee Joint 22427 Reconstruction (Myengerination), Knee Joint Andreadure 22427 Reconstruction Of Knee Joint Langments, Open Procedure, Inside Or Outside Tries Knee Joint 22428 Reconstruction Of Knee Joint Langments, Open Procedure, Inside Or Outside Tries Knee Joint 22429 Reconstruction Of Knee Joint Langments, Open Procedure, Inside Or Outside Tries Knee Joint 22420 Reconstruction Of Knee Joint Langments, Open Procedure, Inside Or Outside Tries Knee Joint 22421 Repair Of Knee Joint Lawer Part Of Joint With Cleaning And Living Removal 22422 Reconstruction Of Knee Joint Lawer Part Of Joint With Cleaning And Living Removal 22424 Repair Of Knee Joint Lawer Part Of Joint With Cleaning And Living Removal 22424 Repair Of Knee Joint Lawer Part Of Joint With Cleaning And Living Removal 22424 Repair Of Knee Joint Lawer Part Of Joint With Cleaning And Living Removal 22424 Repair Of Knee Joint Lawer Part Of Joint With Cleaning And Living Removal 22424 Repair Of Knee Joint Lawer Part Of Joint With Cleaning And Living Removal 22425 Repair Of Knee Joint Lawer Part Of Joint With Cleaning And Living Removal 22426 Repair Of Knee Joint Lawer Of Upper Part Of Joint Inside Of Counted Anne 22427 Repair Of Knee Joint Lawer Of Upper Part Of Joint Inside Of Counted Anne 22428 Repair Of Knee Joint Lawer Of Upper Part Of Joint Inside Of Counted Anne 22429 Repair Of Knee Joint Lawer Of Upper Part Of Joint Inside Of Counted Anne 22429 Repair Of Knee Joint Lawer Of Upper Part Of Joint I			\$880.10
27416 Anterior Tisch Tuberoplasty (E.) Marquet Type Procodure) 2844. 27420 Rapair O'Discosing New Cap, Without Realignment 27422 Regair O'Discosing New Cap, Without Realignment 27422 Regair O'Discosing New Cap, Without Realignment 27423 Regair O'Discosing New Cap, Without Realignment 27424 Reconstruction O'Real Cap, Without Realignment 27424 Reconstruction O'Real Cap, Without Realignment 27427 Reconstruction O'Real Cap, Without Realignment 27427 Reconstruction O'Real Cap, Without Realignment 27428 Reconstruction O'Real Cap, Without Realignment 27429 Reconstruction O'Real Cap, Nove Estat-Articular 27420 Reconstruction O'Real Cap, Nove Estat-Articular Cap, Nove Esta			\$1,486.34
27419 (Repair Of Discotaing Kees Cap, Will Realignment \$5972. 27429 (Repair Of Discotaing Kees Cap, Will Realignment \$575. 27429 (Repair Of Discotaing Kees Cap, Will Realignment \$575. 27429 (Repair Of Discotaing Kees Cap, Will Realignment \$575. 27429 (Reconstruction For Recoursel Discotaing Patellis Will Patallistorny \$5814. 27429 (Reconstruction For Recoursel Discotaing Patellis Will Patallistorny \$582. 27429 (Reconstruction Of Kine Joint Caparlis Procedure, Inside The Knee Joint \$11,132. 27429 (Reconstruction Of Kine Joint Ligaments, Open Procedure, Inside To Outside The Knee Joint \$11,132. 27439 (Reconstruction Of Kine Joint Ligaments, Open Procedure, Inside Or Outside The Knee Joint \$11,132. 27439 (Repair Of Kine Joint Ligaments, Open Procedure, Inside To United The Knee Joint \$11,132. 27439 (Repair Of Kine Joint, Lower Patellis Will Of The State S		, , ,	\$1,406.42
27240, Papar O'Discotaring Kree Cap. Without Realignment 2725. 27242 Ropario O'Discotaring Kree Cap. Without Realignment 2725. 27242 Ropario O'Discotaring Kree Cap. With Realignment 2725. 27242 Ropario O'Discotaring For Recovered Discotaring Patella: With Patellactomy 2726. Reconstruction For Recovered Discotaring Patella: With Patellactomy 2726. Reconstruction (Augmentics O'Knee Cells Articular 2727. Reconstruction (Augmentics O'Knee Cells Articular 2727. Reconstruction (Augmentics O'Knee Patellacy Cells Procedure, Inside The Knee Joint 2727. Reconstruction (Augmentics O'Knee Patellacy Cells Procedure, Inside The Knee Joint 2727. Reconstruction (Augmentics O'Knee Patellacy Cells Procedure, Inside The Knee Joint 2727. Reconstruction (Augmentics O'Knee Cells Procedure, Inside The Knee Joint 2727. Reconstruction (Augmentics O'Knee Cells Procedure, Inside The Knee Joint 2727. Reconstruction (Augmentics O'Knee Cells Procedure, Inside The Knee Joint 2727. Reconstruction (Augmentics O'Knee Cells Procedure) 2727. Reconstruction (Augmentics O'Knee Cells Procedure) 2727. Repair O'Knee Joint, Lower Patel O'Joint With Cleaning And Lining Removal 2727. Repair O'Knee Joint, Lower Patel O'Joint With Cleaning And Lining Removal 2727. Repair O'Knee Joint, Lower Patel O'Joint With Cleaning And Lining Removal 2727. Repair O'Knee Joint, Lower O'Luper Patel O'Joint, Inside O'Luper Patellacy (Augmentics O'Knee Joint, Lower Join			· · · · · · · · · · · · · · · · · · ·
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27450 Steetomy, Femur, Shaft Or Supracondylar, Without Fixation, Unilateral 27450 Osteotomy, Femur, Shaft Or Supracondylar, With Existion, Unilateral 27450 Osteotomy, Pemur, Shaft Or Supracondylar, With Existion, Unilateral 27450 Osteotomy, Pemur, Shaft Or Supracondylar, With Existion For Steetomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Multiple, With Realignment On Intramedullary Rod, Femoral Shaft (Eg. Sofield Type Procedure) 27450 (Steetomy, Proximal This, Including Fishular Excision Or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Proximal This, Including Fishular Excision or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Proximal This, Including Fishular Excision or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Proximal This, Including Fishular Excision or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Proximal This, Including Fishular Correction) 27476 (Steepolary, Femur, Combined Lengthering And Shortening With Femoral Segment Transfer 27476 (Steepolary, Femur, Combined, Lengthering And Shortening With Femoral Segment Transfer 27477 (Repair, Nonunion Or Malunion, Femur, Distal To Head And Nock: Without Graft (Eg. Compression Technique, Etc) 27475 (Arrest, Hemiepsphysolary) (Steepolary) (Steepolary			
27450 Osteolomy, Femur, Shaft Or Supracondylar, With Evaluor: Unitateral 27454 Osteolomy, Multiple, With Realignment On Intramedullary Rod, Femoral Shaft (E.g. Sofield Type Procedure) \$1,158. 27454 Osteolomy, Proximal Tibis, Including Fluliar Excision Or Osteolomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Sofield), Unitateral Before Epiphyseal Closure \$969. 27457 Knoe), Unitateral Before Epiphyseal Closure \$871. 27468 Osteolosty, Femur, Shortening \$1,214. 27460 Osteolosty, Femur, Shortening \$1,214. 27460 Osteolosty, Femur, Combined, Lengthening And Shortening With Femoral Segment Transfer \$1,214. 27470 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (E.g. Compression Technique, Etc) \$1,127. 27472 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (E.g. Compression Technique, Etc) \$1,124. 27473 Farest, Epiphyseal Armst Wy Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal \$2,747. 27474 Epiphyseal Armst By Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal \$2,747. 27475 Perposeal Armst By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibia And Fibula \$2,749. 27476 Revision Of Total Knee Anthroplasty, With Or Without Allograft; Femoral And Entire Tibial Component \$1,407. 27486 Revision Of Total Knee Anthroplasty, With Or Without Allograft; Femoral And Entire Tibial Component \$1,502. 27487 Pepiphysiode Or Prosthesis, Including Total Knee Prosthesis, Merklymetherophysiale, Pemur \$1,206. 27488 Removoir Of Prosthesis, Including Total Knee Prosthesis, Merklymetherophysiale, Femur \$1,206. 27489 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Norwable Muscle And/Or Nerve \$4,202. 27498 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Norwable Muscle And/Or Nerve \$4,202. 27500 Closed Treatment (Of Broken Thigh Bone, Knee Area, Without Manipulation \$5,226. 27501 Open Treatm		1 , 11 ,	
27455 Osteotomy, Multiple, With Realignment On Intramedullary Rod, Femoral Shaft (£g. Sofield Type Procedure) Osteotomy, Proximal Tibis in. Inciding Fishular Excision for Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Strong), Unitateral Before Epiphyseal Closure Osteotomy, Proximal Tibis, Inciding Fishular Excision for Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Strong), Unitateral After Epiphyseal Closure S871. 27465 Osteoplasty, Femur, Engthening \$1,1274. 27465 Osteoplasty, Femur, Engthening \$1,1274. 27466 Osteoplasty, Femur, Combined, Lengthening And Shortening With Femoral Segment Transfer \$1,1274. 27467 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) \$1,187. 27472 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) \$1,187. 27472 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) \$1,187. 27472 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With likac Or Other Autogenous Bone Graft (Includes Obtaining Graft) \$1,187. 27472 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With likac Or Other Autogenous Bone Graft (Includes Obtaining Graft) \$1,187. 27473 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With likac Or Other Autogenous Bone Graft (Includes Obtaining Graft) \$1,187. 27474 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft) \$1,187. 27477 Epiphyseal Arrest By Epiphysiodesis Or Stapling, Combined Distal Femur, Proximal Tible And Flubul \$1,24777 Epiphyseal Arrest By Epiphysiodesis Or Stapling, Combined Distal Femur, Proximal Tible And Flubul \$1,24777 Epiphyseal Arrest By Epiphysiodesis Or Stapling, Combined Distal Femur, Proximal Tible And Flubul \$1,2478 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,19			·
Security, Proximal Tibia, Including Fibular Excision Or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock- 27455 Knee), Unitalerate, Merc Epiphyseal Closure Servis			
Septiment Sept	27 10 1		ψ1,100.00
Osteotomy, Proximal Tibla, Including Fibular Excision Or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock- 247457 Knee), Unilateral, After Epiphyseal Closure \$871. 27466 Osteoplasty, Fermur; Shortening \$1,124. 27466 Osteoplasty, Fermur; Combined, Lengthening \$1,214. 27466 Osteoplasty, Fermur; Combined, Lengthening And Shortening With Femoral Segment Transfer \$1,214. 27470 (Repair, Norunino Or Maluninon, Fermur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) \$1,127. 27472 (Repair, Norunino Or Maluninon, Fermur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) \$1,127. 27472 (Repair, Norunino Or Maluninon, Fermur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft) \$1,143. 27475 Arrest, Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibla And Fibula, Proximal \$1,2479 (Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibla And Fibula, Proximal \$1,2479 (Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibla And Fibula, Proximal \$1,2486 (Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,2486 (Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,407. 27487 (Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,407. 27488 (Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,407. 27489 (Pophylactic Treatment (Naling, Pinning, Pising Or Wiring) With Or Without Methyl Methacrylate, Fernur \$1,307. 27498 (Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle \$1,407. 27499 (Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle \$1,407. 27499 (Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle \$1,409. 27499 (Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compar	27455		\$969.91
2745 Osteoplasty, Fermur, Shortening 2746 Osteoplasty, Fermur, Shortening 2746 Osteoplasty, Fermur, Cembroad, Lengthening 27476 Paper, Nonunion Or Malunion, Fermur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) 27472 Repair, Nonunion Or Malunion, Fermur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) 27473 Repair, Nonunion Or Malunion, Fermur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) 27474 Repair, Nonunion Or Malunion, Fermur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft) 27475 Repair, Nonunion Or Malunion, Fermur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft) 27476 Arrest, Epiphyseal, Arrest Dephysiodesis Or Stalping; Tibla And Fibula, Proximal 27477 Epiphyseal Arrest By Epiphysiodesis Or Stalping; Combined Distal Fermur, Proximal Tibla And Fibula 27485 Arrest, Hemiepiphyseal, Distal Fermur Or Proximal Tibla Or Fibula (Eg. Genu Varus Or Valgus) 27486 Revision Of Total Knee Arthroplasty, With Or Without Allograft, Fermoral And Entire Tibla Component 27487 Revision Of Total Knee Arthroplasty, With Or Without Allograft, Fermoral And Entire Tibla Component 27488 Removal Of Proximals, Including Total Knee Proxthesia, Methylmethacrylate With Or Without Indire Tibla Component 27489 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 27499 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 27490 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 27490 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 27490 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 27500 Closed Treatment Of Broken Thigh Bone, Michoplation 27501 Closed Treatment Of Broken Thigh Bone, Michoplation 27502 (Closed Treatment Of Broken Thigh Bone, Michoplation			400010
27466 Osteoplasty, Femur, Shortening 27466 Osteoplasty, Femur, Lengthening 31.217. 27476 (Steoplasty, Femur, Lengthening 31.217. 27477 (Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) 31.87. 27477 (Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) 31.87. 27472 (Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) 31.87. 27473 (Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With Illiac Or Other Autogenous Bone Graft (Includes Obtaining Graft) 31.143. 327475 (Arrest, Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal 327476 (Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur (Proximal Tibia And Fibula) 327485 (Arrest, Herniepphyseal, Distal Femur Or Proximal Tibia Or Fibula (Eg. Genu Varus Or Valgus) 38689. 3844. 327486 (Revision Of Total Knee Arthroplasty, With Or Without Allograft, Emoral And Entire Tibial Component 31.407. 327478 (Revision Of Total Knee Arthroplasty, With Or Without Allograft, Emoral And Entire Tibial Component) 31.72479 (Epiphyseal Arrest By Epiphyseal Separation, Without Manipulation 38275			\$871.73
27470 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) \$1,187. 27477 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) \$1,187. 27478 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft) \$1,143. 27477 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft) \$1,143. 27477 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tobia And Fibula, Proximal 27478 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tobia And Fibula, Proximal Tibia And Fibula 27488 Arrest, Hemiepiphyseal Distal Femur Or Proximal Tibia Or Fibula (Eg. Genu Varus Or Valgus) 27486 Revision Ol Total Knee Arthroplasty, With Or Without Allograft One Component 27487 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component 27487 Revision Of Total Knee Arthroplasty, With Or Without Allograft (Pemoral And Entire Tibial Component) 27488 Removal Of Prosthesis, Including Total Knee Prosthesis, Methylmethacrylate With Or Without Insertion Of Spacer, Knee 31,206. 27498 Prophylactic Treatment (Naling, Prinning, Plating Or Without Methyl Methacrylate, Femur 31,1373. 27496 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 27497 And/Or Nerve 27498 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; 27500 (Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation 27501 (Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation 27502 (Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation 27503 (Closed Treatment Of Broken Thigh Bone, With Manipulation) 27504 (Closed Treatment Of Broken Thigh Bone or Separated Growth Plata, Accessed Through The Skin 27505 (Open Treatment Of Broken Thigh Bon			\$1,127.68
27477 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg., Compression Technique, Etc) \$1,187. 27472 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft) \$1,143.1 27473 Arrest, Epiphyseal, Arny Method (Eg., Epiphydiodesis); Distal Femur \$673.2 27477 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tolia And Fibula, Proximal \$744.2 27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibia And Fibula \$834.2 27485 Arrest, Hemiepiphyseal, Distal Femur Or Proximal Tibia Or Fibula (Eg., Genu Varus Or Valgus) \$869.1 27486 Revision OT Total Knee Arthroplasty, With Or Without Allograft One Component \$1,407.4 27487 Revision OT Total Knee Arthroplasty, With Or Without Allograft; Femoral And Entire Tibial Component \$1,407.4 27488 Removal Of Proximals, Including Total Knee Proximals; Methymethacrylate Withor Unsertion Of Spacer, Knee \$1,206. 27489 Prophylactic Treatment (Nailing, Pirning, Pitaling Or Wiring) With Or Without Insertion Of Spacer, Knee \$1,206. 27498 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); Becompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; 27498 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; 27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; 27500 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$483.2 27501 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation \$772.2 27502 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation \$772.2 27503 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation \$772.5 27504 Open Treatment Of Broken Thigh Bone, Lower End, Without Manipulation \$772.5 27505 Open Treatment Of Broken Thigh Bone, Knee Area, Manipulation \$77505 Open Treatment Of Broken Thigh Bone, Knee Area, Manipulation \$77506 Open Treatment Of Broken Thigh Bone, Knee Area, Manipula	27466	Osteoplasty, Femur; Lengthening	\$1,214.21
27472 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft) \$1,143, 27475 Arrest, Epiphyseal, Arest By Epiphysiodesis Or Stapling; Crossing Tibula, Proximal \$673, 27477 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Crossing Tibula, Proximal Tibula And Fibula \$744, 27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Crossined Distal Femur, Proximal Tibula And Fibula \$744, 27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibula And Fibula \$744, 27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibula And Fibula \$744, 27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibula And Fibula \$744, 27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibula And Fibula \$744, 27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibula And Fibula \$744, 27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibula And Fibula \$744, 27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibula And Fibula \$744, 27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibula And Fibula \$744, 27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibula And Fibula \$748, 27480 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibula And Fibula \$749, 27490 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibula And Fibula \$749, 27490 Epiphyseal Arrest By Epiphysiodesis Or Stapling Emury, Proximal Tibula And Fibula \$749, 27490 Epiphyseal Epiphyseal Separation; Without Manipulation \$740, 27490 Epiphyseal Separation; With Distal Emoral Epiphyseal Separation; With Debridement Of Nonviable Muscle And/Or Nerve \$740, 27490 Epiphysiodesia Proximal Epiphyseal Separation; With Debridement Of State	27468	Osteoplasty, Femur; Combined, Lengthening And Shortening With Femoral Segment Transfer	\$1,211.95
27475 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal \$744. 27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibia And Fibula \$834. 27495 Arrest, Hemiepiphyseal, Distal Femur Or Proximal Tibia Or Fibula (Eg. Genu Varus Or Valgus) \$889. 27486 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,407. 27487 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,207. 27488 Removal Of Prosthesis, Including Total Knee Prosthesis, Methylimethacrylate With Or Without Insertion Of Spacer, Knee \$1,206. 27488 Removal Of Prosthesis, Including Total Knee Prosthesis, Methylimethacrylate With Or Without Insertion Of Spacer, Knee \$1,206. 27495 Prophylactic Treatment (Nalling, Pinning, Plating Or Winnig) With Or Without Hollery Methacrylate, Femur \$1,137. 27496 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); \$505. 27497 And/Or Nerve \$532. 27498 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle And/Or Nerve \$642. 27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; \$602. 27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve \$642. 27500 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$483. 27501 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$1519. 27502 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$128. 27503 Closed Treatment Of Broken Thigh Bone, Knee Area, Wanipulation \$128. 27504 Open Treatment Of Broken Thigh Bone or Separated Growth Plate, Accessed Through The Skin \$275. 27505 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin \$275. 27506 Open Treatment Of Broken Thigh Bone or The Area Of The Knee With Manipulation \$128. 27510 Open Treatment Of Broken Thigh Bone or T	27470	Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg, Compression Technique, Etc)	\$1,187.53
27475 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal \$744. 27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibia And Fibula \$834. 27495 Arrest, Hemiepiphyseal, Distal Femur Or Proximal Tibia Or Fibula (Eg. Genu Varus Or Valgus) \$889. 27486 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,407. 27487 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,207. 27488 Removal Of Prosthesis, Including Total Knee Prosthesis, Methylimethacrylate With Or Without Insertion Of Spacer, Knee \$1,206. 27488 Removal Of Prosthesis, Including Total Knee Prosthesis, Methylimethacrylate With Or Without Insertion Of Spacer, Knee \$1,206. 27495 Prophylactic Treatment (Nalling, Pinning, Plating Or Winnig) With Or Without Hollery Methacrylate, Femur \$1,137. 27496 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); \$505. 27497 And/Or Nerve \$532. 27498 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle And/Or Nerve \$642. 27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; \$602. 27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve \$642. 27500 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$483. 27501 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$1519. 27502 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$128. 27503 Closed Treatment Of Broken Thigh Bone, Knee Area, Wanipulation \$128. 27504 Open Treatment Of Broken Thigh Bone or Separated Growth Plate, Accessed Through The Skin \$275. 27505 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin \$275. 27506 Open Treatment Of Broken Thigh Bone or The Area Of The Knee With Manipulation \$128. 27510 Open Treatment Of Broken Thigh Bone or T			
27477 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal \$744.	27472	Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft)	\$1,143.04
Epiphyseal Arrest By Epiphyseidesis Or Stapling: Combined Distal Femur, Proximal Tibia And Fibula \$834.	27475	Arrest, Epiphyseal, Any Method (Eg, Epiphydiodesis); Distal Femur	\$673.98
27485 Arrest, Hemiepiphyseal, Distal Femur Or Proximal Tibia Or Fibula (Eg. Genu Varus Or Valgus) 27486 Revision Of Total Knee Arthroplasty, With Or Without Allograft (De Component) 31,407.4 27487 Revision Of Total Knee Arthroplasty, With Or Without Allograft, Femoral And Entire Tibial Component 31,752.2 27488 Removal Of Prosthesis, Including Total Knee Prosthesis, Methylmethacrylate With Or Without Insertion Of Spacer, Knee 31,206. 27495 Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methyl Methacrylate, Femur 41,379. 27496 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 27497 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle 27497 And/Or Nerve 4532.0 27498 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; 27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; 27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; 27500 Closed Treatment Of Femoral Shaft Fracture, Without Manipulation 4548.3 27501 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation 5519.0 5520 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation 57502 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation 57503 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation 57503 Open Treatment With Plate/Screws Of Broken Thigh Bone 57504 Open Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion 57506 Closed Treatment Of Broken Thigh Bone or Separated Growth Plate, Accessed Through The Skin 57507 Open Treatment Of Broken Thigh Bone or Separated Growth Plate, Accessed Through The Skin 57508 Closed Treatment Of Broken Thigh Bone or Separated Growth Plate, Accessed Through The Skin 57509 Open Treatment Of Broken Thigh Bone In The Area Of The Knee 57501 Closed Treatment Of Broken Thigh Bone In The Area Of The Knee 57502 Closed Treatment Of Distal Femoral Epiphyseal	27477	Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal	\$744.72
27486 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component 27487 Revision Of Total Knee Arthroplasty, With Dr Without Allograft; Femoral And Entire Tibial Component 31,752. 27488 Revoval Of Prosthesis, Including Total Knee Prosthesis, Methylmethacrylate With Or Without Insertion Of Spacer, Knee 31,206. 27495 Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methyl Methacrylate, Femur 31,137. 27496 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 3505. 3505. 3505. 3505. 3505. 3506. 3709 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 3506. 3709 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 3501. 3709 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; 3700 Closed Treatment Of Brocken Thigh And/Or Knee, Multiple Compartments; 3701 Closed Treatment Of Femoral Shaft Fracture, Without Manipulation 3700 Closed Treatment Of Brocken Thigh Bone, Knee Area, Without Manipulation 3700 Closed Treatment Of Brocken Thigh Bone, Knee Area, Without Manipulation 3700 Closed Treatment Of Brocken Thigh Bone, Knee Area, Without Manipulation 3700 Open Treatment Of Brocken Thigh Bone, Knee Area, Without Manipulation 3700 Open Treatment With Plate/Screws Of Brocken Thigh Bone 3700 Open Treatment With Plate/Screws Of Brocken Thigh Bone 3700 Open Treatment Of Brocken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion 3700 Open Treatment Of Brocken Thigh Bone Lower End, Without Manipulation 3700 Open Treatment Of Brocken Thigh Bone Lower End, Without Manipulation 3700 Open Treatment Of Brocken Thigh Bone of The Knee With Manipulation 3700 Open Treatment Of Brocken Thigh Bone In The Area Of The Knee With Manipulation 3701 Open Treatment Of Brocken Thigh Bone In The Area Of The Knee With Manipulation 3701 Open Treatment Of Brocken Thigh Bone In The Area Of The Knee With Manipulation 3701 Open Treatment Of Brocken Th	27479	Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibia And Fibula	\$834.92
27487 Revision Of Total Knee Arthroplasty, With Or Without Allograft; Femoral And Entire Tibial Component \$1,752. 27488 Removal Of Prosthesis, Including Total Knee Prosthesis, Methylmethacrylate With Or Without Insertion Of Spacer, Knee \$1,206. 27498 Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methyl Methacrylate, Femur \$1,137. 27496 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); \$505. 27497 And/Or Nerve \$532. 27498 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle 27497 And/Or Nerve \$532. 27498 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve \$642. 27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve \$642. 27498 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve \$642. 27509 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$483. 27501 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$728. 27502 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation \$728. 27503 Open Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion \$480. 27509 Open Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion \$480. 27501 Closed Treatment Of Broken Thigh Bone or Separated Growth Plate, Accessed Through The Skin \$627. 27502 Open Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation \$483. 27503 Open Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation \$618. 27504 Open Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation \$483. 27507 Open Treatment Of Distal Femoral Epiphyseal Separa			\$689.63
27488 Removal Of Prosthesis, Including Total Knee Prosthesis, Methylmethacrylate With Or Without Insertion Of Spacer, Knee \$1,206.			\$1,407.64
27495 Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methyl Methacrylate, Femur \$1,137.5			\$1,752.12
27496 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle And/Or Nerve \$532.0 27498 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; Becompression Fasciotomy, Thigh Bone, Knee, Multiple Compartments; Becompression Fasciotomy, Thigh Bone, Multiple Compartments; Becompression			\$1,206.47
Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle \$532.4 27498 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; \$602.6 27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve \$642.6 27500 Closed Treatment Of Femoral Shaft Fracture, Without Manipulation \$483.1 27501 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$512.2 27502 Closed Treatment Of Broken Thigh Bone, Mid-Portion With Manipulation \$728.1 27503 Closed Treatment Of Broken Thigh Bone, Mid-Portion With Manipulation \$728.1 27505 Open Treatment Of Broken Thigh Bone, Knee Area, Manipulation \$728.1 27506 Open Treatment Of Broken Thigh Bone, With Implant \$11,344. 27507 Open Treatment With Plate/Screws Of Broken Thigh Bone \$973. 27508 Closed Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion \$480.2 27509 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin \$622.7 27510 Closed Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation \$618. 27511 Open Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation \$618. 27512 Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur) \$1,238. 27514 Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur) \$1,238. 27517 Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation, With Or Without Skin Or Skeletal Traction \$483. 27510 Closed Treatment Of Distal Femoral Epiphyseal Separation; Includes Internal Fixation, When Performed \$483. 27520 Closed Treatment Of Patellar Fracture, Without Manipulation			\$1,137.93
27498 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; 27498 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve 27500 Closed Treatment Of Femoral Shaft Fracture, Without Manipulation 3483.3 27501 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation 3519. 27502 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation 3728. 27503 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation 3728. 27506 Open Treatment Of Broken Thigh Bone, Knee Area, Manipulation 3728. 27507 Open Treatment Of Broken Thigh Bone, With Implant 37507 Open Treatment With Plate/Screws Of Broken Thigh Bone 373. 27508 Closed Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion 37509 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin 3627. 37510 Closed Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation 3618. 37511 Open Treatment Of Broken Thigh Bone In The Area Of The Knee 3985. 37513 Open Treatment Of Broken Thigh Bone In The Area Of The Knee 3985. 37514 Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur) 37516 Closed Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur) 37517 Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation, With Or Without Skin Or Skeletal Traction 3807. 37510 Closed Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed 3807. 37520 Closed Treatment Of Patellar Fracture, Without Manipulation 3807.			\$505.45
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27514 Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur) 27516 Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation 483.4 27517 Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction 4632.0 27519 Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed 4807.2 27520 Closed Treatment Of Patellar Fracture, Without Manipulation 4825.6	2,011	, and the second	ψ000.01
27514 Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur) 27516 Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation 483.4 27517 Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction 4632.0 27519 Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed 4807.2 27520 Closed Treatment Of Patellar Fracture, Without Manipulation 4825.6	27513	Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondvlar Or Transcondvlar Fracture Of Femur)	\$1,238.24
27516Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation\$483.427517Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction\$632.027519Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed\$807.227520Closed Treatment Of Patellar Fracture, Without Manipulation\$225.0		· · · · · · · · · · · · · · · · · · ·	. ,
27516Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation\$483.427517Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction\$632.027519Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed\$807.227520Closed Treatment Of Patellar Fracture, Without Manipulation\$225.0	27514	Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur)	\$971.66
27517Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction\$632.027519Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed\$807.027520Closed Treatment Of Patellar Fracture, Without Manipulation\$225.0			\$483.43
27519 Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed\$807.227520 Closed Treatment Of Patellar Fracture, Without Manipulation\$225.6			\$632.00
27520 Closed Treatment Of Patellar Fracture, Without Manipulation \$225.0			\$807.23
	27520	Closed Treatment Of Patellar Fracture, Without Manipulation	\$225.62
	27524	Open Treatment Of Patellar Fracture, With Internal Fixation And/Or Partial Or Complete Patellectomy And Soft Tissue Repair	\$764.97

Code Description	Foo
Code Description 27530 Closed Treatment Of Tibial Fracture, Proximal (Plateau); Without Manipulation	Fee \$264.46
27532 Closed Treatment Of Tibial Fracture, Proximal (Plateau); With Or Without Manipulation, With Skeletal Traction	\$491.28
27535 Open Treatment Of Fracture Of One Side Of Upper End Of Shinbone (Medial Or Lateral Condyle Fracture Of Tibial Plateau)	\$937.41
27536 Open Treatment Of Fracture Of Both Sides Of Upper End Of Shinbone (Medial Or Lateral Condyle Fracture Of Tibial Plateau)	\$1,111.94
27538 Closed Treatment Of Intercondylar Spine(S) And/Or Tuberosity Fracture(S) Of Knee, With Or Without Manipulation	\$455.91
27540 Open Treatment Of Intercondylar Spine(S) And/Or Tuberosity Fracture(S) Of The Knee, Includes Internal Fixation, When Performed	\$824.90
27550 Closed Treatment Of Knee Dislocation; Without Anesthesia	\$479.10
27552 Treatment Of Closed Knee Dislocation; Requiring Anesthesia	\$427.98
Open Treatment Of Knee Dislocation, Includes Internal Fixation, When Performed; Without Primary Ligamentous Repair Or	
27556 Augmentation/Reconstruction	\$794.35
27557 Open Treatment Of Knee Dislocation With Ligament Repair	\$944.51
27558 Open Treatment Of Knee Dislocation With Ligament Repair And Augmentation/Reconstruction 27560 Closed Treatment Of Patellar Dislocation; Without Anesthesia	\$1,072.49 \$253.83
27560 Closed Treatment Of Patellar Dislocation; Williodi Ariestriesia 27562 Treatment Of Closed Patellar Dislocation; Requiring Anesthesia	\$450.63
27566 Open Treatment Of Patellar Dislocation, With Or Without Partial Or Total Patellectomy	\$936.11
27570 Manipulation Of Knee Joint Under General Anesthesia (Includes Application Of Traction Or Other Fixation Devices)	\$136.54
27580 Arthrodesis, Knee, Any Technique	\$1,491.22
27590 Amputation, Thigh, Through Femur, Any Level;	\$772.19
27591 Amputation Of Thigh Through Thigh Bone With Immediate Fitting	\$875.44
27592 Amputation Of Thigh Through Thigh Bone, Open Procedure	\$595.16
27594 Amputation Of Thigh Through Thigh Bone, Secondary Closure 27596 Amputation, Thigh, Through Femur, Any Level; Reamputation	\$424.61 \$728.69
27598 Disarticulation At Knee	\$694.35
27599 Unlisted Procedure, Femur Or Knee	Price By Report
27600 Decompression Fasciotomy, Leg; Anterior And/Or Lateral Compartments Only	\$366.40
27601 Decompression Fasciotomy, Leg; Posterior Compartment(S) Only	\$409.98
27602 Decompression Fasciotomy, Leg; Anterior And/Or Lateral, And Posterior Compartment(S)	\$456.08
27603 Incision And Drainage; Deep Abscess Or Hematoma	\$366.30
27604 Incision And Drainage; Infected Bursa 27605 Incision Of Achilles Tendon, Accessed Through The Skin Using Local Anesthetic	\$424.01
27606 Incision Of Achilles Tendon, Accessed Through The Skin Columbia Requiring General Anesthesia	\$232.95 \$278.18
27607 Incision (Eg, Osteomyelitis Or Bone Abscess), Leg Or Ankle	\$555.02
27610 Exploration, Drainage, Or Removal Of Foreign Body Of Ankle	\$644.96
27612 Arthrotomy, Posterior Capsular Release, Ankle, With Or Without Achilles Tendon Lengthening	\$574.10
27613 Biopsy, Soft Tissues; Superficial	\$240.71
27614 Biopsy, Soft Tissue Of Leg Or Ankle Area; Deep (Subfascial Or Intramuscular)	\$547.79
27615 Removal (Less Than 5 Centimeters) Tissue Growth Of Leg Or Ankle	\$923.77
27616 Removal (5 Centimeters Or Greater) Tissue Growth Of Leg Or Ankle 27618 Excision, Tumor, Soft Tissue Of Leg Or Ankle Area, Subcutaneous; Less Than 3 Cm	\$1,138.57 \$433.97
27619 Excision, Tumor, Soft Tissue Of Leg Or Ankle Area, Subcatalleous, Less Than 5 Cm	\$470.87
27620 Arthrotomy, Ankle, With Joint Exploration, With Or Without Biopsy, With Or Without Removal Of Loose Or Foreign Body	\$462.93
27625 Arthrotomy, Ankle, With Synovectomy;	\$587.85
27626 Arthrotomy, Ankle, For Synovectomy; Including Tenosynovectomy	\$555.67
27630 Excision Of Lesion Of Tendon Sheath Or Capsule (Eg, Cyst Or Ganglion)	\$513.54
27632 Removal (3 Centimeters Or Greater) Tissue Growth Beneath The Skin Of Leg Or Ankle	\$438.60
27634 Excision Of Lesion Of Tendon Sheath Or Capsule (Eg, Cyst Or Ganglion), Leg And/Or Ankle 5 Cm Or Greater	\$613.42
27635 Excision Or Curettage Of Bone Cyst Or Benign Tumor, Tibia Or Fibula; 27637 Excision Or Curettage Of Bone Cyst Or Benign Tumor, Tibia Or Fibula; With Primary Autogenous Graft (Includes Obtaining Graft)	\$592.26 \$673.65
27638 Excision Or Curettage Of Bone Cyst Or Benign Tumor, Tibia Or Fibula; With Primary Homogenous Graft	\$763.91
27640 Partial Excision (Craterization, Saucerization, Or Diaphysectomy), Bone (Eg, Osteomyelitis); Tibia	\$844.84
27641 Partial Excision (Craterization, Saucerization, Or Diaphysectomy), Bone (Eg, Osteomyelitis); Fibula	\$598.63
27645 Radical Resection Of Tumor; Tibia	\$1,589.14
27646 Radical Resection Of Tumor; Fibula	\$1,382.97
27647 Radical Resection Of Tumor; Talus Or Calcaneus	\$922.40
27648 Injection Procedure For Ankle Arthrography 27650 Repair Of Ruptured Achilles Tendon, Open Or Through Skin Procedure	\$194.99 \$676.21
27650 Repair Of Ruptured Achilles Tendon With Graft, Open Or Through Skin Procedure	\$610.27
27654 Repair, Secondary, Achilles Tendon, With Or Without Graft	\$730.54
27656 Repair, Fascial Defect Of Leg	\$482.30
27658 Repair Of Leg Tendon On The Back Side Of The Leg (Flexor), Primary, Without Graft	\$364.85
27659 Repair Of Leg Tendon On The Back Side Of The Leg (Flexor), Secondary With Or Without Graft	\$483.39
27664 Repair Of Leg Tendon On The Front Of The Leg (Extensor), Primary, Without Graft	\$338.06
27665 Repair Of Leg Tendon On The Front Of The Leg (Extensor), Secondary With Or Without Graft 27675 Repair Of Dislocating Lower Leg Tendons Without A Cut Through The Lower Leg Bone On The Outside Of The Leg (Fibula)	\$426.23 \$505.82
27676 Repair Of Dislocating Lower Leg Tendons With A Cut Through The Lower Leg Bone On The Outside Of The Leg (Fibula)	\$652.94
27680 Tenolysis, Flexor Or Extensor Tendon, Leg And/Or Ankle; Single, Each Tendon	\$401.36
27681 Tenolysis, Flexor Or Extensor Tendon, Leg And/Or Ankle; Multiple Tendons (Through Separate Incision(S))	\$468.62
27685 Lengthening Or Shortening Of Tendon, Leg Or Ankle; Single Tendon (Separate Procedure)	\$624.52
27686 Lengthening Or Shortening Of Tendon, Leg Or Ankle; Multiple Tendons (Through Same Incision), Each	\$490.75
27687 Gastrocnemius Recession (Eg, Strayer Procedure)	\$475.77
27690 Transfer Or Transplant Of Single Tendon (With Muscle Redirection Or Rerouting); Superficial (Eg, Anterior Tibial Extensors Into Midfoot)	¢502.40
Transfer Or Transplant Of Single Tendon (With Muscle Redirection Or Rerouting), Superficial (Eg, Anterior Tibial Or Posterior Tibial Through	\$592.10
27691 Interosseous Space, Flexor Digitorum Longus, Flexor Hallucis Longus, Or Peroneal Tendon To Midfoot Or Hindfoot)	\$726.31
27692 Transplant Of Tendon And Muscle Rerouting At Lower Leg Or Ankle, Additional Tendon	\$100.57

	Description Primary Pageir Of Discreption Of Both Ankla Ligaments	Fee
	Primary Repair Of Disruption Of Both Ankle Ligaments Repair Of Disrupted Collateral Ligament Of Ankle, Secondary	\$563.30 \$651.04
	Arthroplasty, Ankle;	\$566.86
	Arthroplasty, Ankle; With Implant ("Total Ankle")	\$975.00
	Arthroplasty, Ankle, Revision, Total Ankle	\$1,007.98
	Removal Of Ankle Implant	\$524.74
	Osteotomy; Tibia	\$770.51
	Osteotomy; Fibula	\$374.51
	Osteotomy; Tibia And Fibula	\$1,037.51
	Osteotomy; Multiple, With Realignment On Intramedullary Rod (Eg, Sofield Type Procedure)	\$964.05
	Osteoplasty, Tibia And Fibula, Lengthening Or Shortening	\$973.15
	Repair Of Nonunion Or Malunion, Tibia; Without Graft, (Eg, Compression Technique, Etc)	\$886.01
	Repair Of Nonunion Or Malunion, Tibia; With Sliding Graft	\$815.56
	Repair Of Nonunion Or Malunion, Tibia; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft)	\$1,257.25
	Repair Of Nonunion Or Malunion, Tibia; By Synostosis, With Fibula, Any Method	\$1,101.07
	Repair Of Fibula Nonunion And/Or Malunion With Internal Fixation	\$977.05
	Repair Of Congenital Pseudarthrosis, Tibia	\$954.58
	Scraping Or Stapling Of Shin Bone Growth Plate, Open Procedure	\$512.51
	Scraping Or Stapling Of Leg Bone Growth Plate, Open Procedure	\$419.09
	Scraping Or Stapling Of Growth Plates Of Leg Bones, Open Procedure	\$602.97
	Arrest, Epiphyseal (Epiphysiodesis), Any Method, Combined, Proximal And Distal Tibia And Fibula;	\$647.54
	Epiphyseal Arrest By Epiphysiodesis Or Stapling, Combined, Proximal And Distal Tibia And Fibula; And Distal Femur	\$709.54
	Epipnyseal Arrest By Epipnyslodesis Or Stapling, Combined, Proximal And Distal Tibla And Fibula; And Distal Femur Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methyl Methacrylate, Tibla	
		\$691.31
2//50	Closed Treatment Of Tibial Shaft Fracture (With Or Without Fibular Fracture); Without Manipulation	\$360.58
27752	Closed Treatment Of Tibial Shaft Fracture (With Or Without Fibular Fracture); With Manipulation, With Or Without Skeletal Traction	¢ ECQ 40
	Insertion Of Fixation To Broken Shin Bone, Accessed Through The Skin	\$568.48 \$593.15
	Open Treatment Of Tibial Shaft Fracture, (With Or Without Fibular Fracture) With Plate/Screws, With Or Without Cerclage	
	Treatment Of Tibial Shaft Fracture (With Or Without Fibular Fracture) with Plate/Screws, With Or Without Cerciage Treatment Of Tibial Shaft Fracture (With Or Without Fibular Fracture) By Intramedullary Implant, With Or Without Interlocking Screws And/Or	\$907.86
	Treatment Of Tibial Shatt Fracture (with Or Without Fibular Fracture) By Intramedulary Implant, With Or Without Interlocking Screws And/Or Cerclage	\$1,005.69
	Closed Treatment Of Inside Portion Of The Leg (Tibial) Bone Of The Ankle Without Manipulation	
		\$322.84
	Closed Treatment Of Inside Portion Of The Leg (Tibial) Bone Of The Ankle With Manipulation	\$330.42
	Open Treatment Of The Inside Prominence Of Bone Of The Leg (Fibula) In The Region Of The Ankle	\$619.07
	Closed Treatment Of Back Portion Of The Leg (Tibial) Bone Of The Ankle Without Manipulation	\$263.08
	Closed Treatment Of Back Portion Of The Leg (Tibial) Bone Of The Ankle With Manipulation	\$417.48
	Open Treatment Of The Prominence Of The Ankle Located In The Back Of The Ankle	\$724.34
	Closed Treatment Of The Outside Bone Of The Leg (Fibula) In The Middle Or Upper End Without Manipulation	\$214.99
27781	Closed Treatment Of The Outside Bone Of The Leg (Fibula) In The Middle Or Upper End With Manipulation	\$317.09
27784	Open Treatment Of The Outer Bone Of The Lower Leg	\$649.10
27786	Closed Treatment Of The Outside Bone Of The Leg (Fibula) In The Region Of The Ankle Without Manipulation	\$329.48
27788	Closed Treatment Of The Outside Bone Of The Leg (Fibula) In The Region Of The Ankle With Manipulation	\$318.71
27792	Open Treatment Of The Outside Prominence Of Bone Of The Leg (Fibula) In The Region Of The Ankle	\$659.35
27808	Closed Treatment Of Both The Portion Of The Both Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle Without Manipulation	\$233.29
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27810	Closed Treatment Of Both The Portion Of The Both Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle With Manipulation	\$419.06
	Open Treatment Of Prominences Of Both Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle Without Hardware Fixation	\$777.65
	. , , , ,	*
27816	Closed Treatment Of All Three The Portions Of The Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle Without Manipulation	\$298.61
	3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3	
27818	Closed Treatment Of All Three The Portions Of The Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle With Manipulation	\$493.32
	Open Treatment Of All Three Prominences Of The Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle	\$899.44
	Open Treatment Of Prominences Of Both Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle With Hardware Fixation	\$1,007.66
	Closed Treatment Of Fracture Of Weight Bearing Articular Portion Of Distal Tibia (Eg. Pilon Or Tibial Plafond), With Or Without Anesthesia;	ψ.,σσσσ
	Without Manipulation	\$265.76
	Closed Treatment Of Fracture Of Weight Bearing Articular Portion Of Distal Tibia (Eg. Pilon Or Tibial Plafond), With Or Without Anesthesia; With	Ψ200.70
	Skeletal Traction And/Or Requiring Manipulation	\$369.12
	Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Fibula (Smaller Lower Leg Bone)	\$773.92
		Ψ110.32
		\$Q12 FQ
27827	Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone	\$918.58 \$1,259.80
27827 27828	Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones	\$1,259.80
27827 (27828 (27829 (Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed	\$1,259.80 \$537.71
27827 (27828 (27829 (27830 (Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia	\$1,259.80 \$537.71 \$366.86
27827 (27828 (27829 (27830 (Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed	\$1,259.80 \$537.71
27827 (27828 (27829 (27830 (27831)	Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia	\$1,259.80 \$537.71 \$366.86 \$380.33
27827 (27828 (27829 (27830 (27831 - 27832 (Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula	\$1,259.80 \$537.71 \$366.86 \$380.33
27827 (27828 (27829 (27830 (27831 (27832 (27832 (27840 (27	Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia	\$1,259.80 \$537.71 \$366.86 \$380.33 \$692.49 \$259.96
27827 (27828 (27829 (27831) 27831) 27832 (27840 (27842 (Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation	\$1,259.80 \$537.71 \$366.86 \$380.33 \$692.49 \$259.96 \$430.85
27827 (27828 (27829 (27831) 27831) 27832 (27840 (27842 (27846 (Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation	\$1,259.80 \$537.71 \$366.86 \$380.33 \$692.49 \$259.96 \$430.85 \$662.01
27827 (27828 (27829 (27831) 27831) 27832 (27840 (27842 (27846 (27848 (Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation	\$1,259.80 \$537.71 \$366.86 \$380.33 \$692.49 \$259.96 \$430.85 \$662.01
27827 (27828 (27829 (27831 (27831 (27842 (27842 (27848 (27848 (27846 (27	Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation Manipulation Of Ankle Under General Anesthesia (Includes Application Of Traction Or Other Fixation Apparatus)	\$1,259.80 \$537.71 \$366.86 \$380.33 \$692.49 \$259.96 \$430.85 \$662.01 \$797.48
27827 (27828 (27829 (27830 (27831) 27831 (27840 (27842 (27846 (27848 (27870)	Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation Manipulation Of Ankle Under General Anesthesia (Includes Application Of Traction Or Other Fixation Apparatus) Fusion Of Ankle Joint, Open Procedure	\$1,259.80 \$537.71 \$366.86 \$380.33 \$692.49 \$259.96 \$430.85 \$662.01 \$797.48 \$156.50
27827 (27828 (27829 (27830 (27831) 27831 (27832 (27842 (27842 (27846 (27848 (27860) 27870 (27871)	Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation Manipulation Of Ankle Under General Anesthesia (Includes Application Of Traction Or Other Fixation Apparatus) Fusion Of Ankle Joint, Open Procedure Arthrodesis, Tibiofibular Joint, Proximal Or Distal	\$1,259.80 \$537.71 \$366.86 \$380.33 \$692.49 \$259.96 \$430.85 \$662.01 \$797.48 \$156.50 \$1,012.84
27827 (27828 (27829 (27831) 27831) 27832 (27840 (27842 (27846 (27848 (27860) 27870) 27870) 27870) 27870 (27880)	Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation Manipulation Of Ankle Under General Anesthesia (Includes Application Of Traction Or Other Fixation Apparatus) Fusion Of Ankle Joint, Open Procedure Arthrodesis, Tibiofibular Joint, Proximal Or Distal Amputation Leg, Through Tibia And Fibula;	\$1,259.80 \$537.71 \$366.86 \$380.33 \$692.49 \$259.96 \$430.85 \$662.01 \$797.48 \$156.50 \$1,012.84 \$692.81
27827 (27828 (27829 (27831) 27831) 27832 (27840 (27846 (27846 (27846 (27860) 27870) 27871) 27881 , 27880 (27881)	Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation Manipulation Of Ankle Under General Anesthesia (Includes Application Of Traction Or Other Fixation Apparatus) Fusion Of Ankle Joint, Open Procedure Arthrodesis, Tibiofibular Joint, Proximal Or Distal Amputation Leg, Through Tibia And Fibula; With Immediate Fitting Technique Including Application Of First Cast	\$1,259.80 \$537.71 \$366.86 \$380.33 \$692.49 \$259.96 \$430.85 \$662.01 \$797.48 \$156.50 \$1,012.84 \$692.81 \$816.23
27827 (27828 (27829 (27831) 27831) 27832 (27840 (27842 (27846 (27846 (27846 (27860) 27870) 27871) 27881 (27888 (27888 (27886) 27881) 27882 (278888 (278888 (278888 (278888 (278888 (278888 (278888 (278888 (2788888 (2788888 (278888 (278888 (278888 (278888 (278888 (2788888 (2788888 (278888 (278888 (2788888 (278888888 (2788888 (2788888 (2788888 (2788888 (27888888 (2788888 (278888888 (27888888 (2788888 (27888888 (27888888 (27888888 (27888888 (278888888 (27888888 (27888888888 (27888888888 (278888888888	Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation Manipulation Of Ankle Under General Anesthesia (Includes Application Of Traction Or Other Fixation Apparatus) Fixsion Of Ankle Joint, Open Procedure Arthrodesis, Tibiofibular Joint, Proximal Or Distal Amputation Leg, Through Tibia And Fibula; Amputation Leg, Through Tibia And Fibula; With Immediate Fitting Technique Including Application Of First Cast Amputation Of Leg, Open Procedure	\$1,259.80 \$537.71 \$366.86 \$380.33 \$692.49 \$259.96 \$430.85 \$662.01 \$797.48 \$156.50 \$1,012.84 \$692.81
27827 (27828 (27829 (27830 (27831) 27831 (27832 (27840 (27842 (27846 (27846 (27847) 27870 (27871) 27881 (27882 (27884 (Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation Manipulation Of Ankle Under General Anesthesia (Includes Application Of Traction Or Other Fixation Apparatus) Fusion Of Ankle Joint, Open Procedure Arthrodesis, Tibiofibular Joint, Proximal Or Distal Amputation Leg, Through Tibia And Fibula; With Immediate Fitting Technique Including Application Of First Cast	\$1,259.80 \$537.71 \$366.86 \$380.33 \$692.49 \$259.96 \$430.85 \$662.01 \$797.48 \$156.50 \$1,012.84 \$692.81 \$816.23

Code	Description	Fee
27888	Amputation, Ankle, Through Malleoli Of Tibia And Fibula (Eg, Syme, Pirogoff Type Procedures), With Plastic Closure And Resection Of Nerves	\$588.43
	Amputation Of Foot Through Ankle Joint	\$566.51
27892	Decompression Fasciotomy, Leg; Anterior And/Or Lateral Compartments Only, With Debridement Of Nonviable Muscle And/Or Nerve	\$459.35
	Decompression Fasciotomy, Leg; Posterior Compartment(S) Only, With Debridement Of Nonviable Muscle And/Or Nerve	\$563.33
	Decompression Fasciotomy, Leg; Anterior And/Or Lateral, And Posterior Compartment(S), With Debridement Of Nonviable Muscle And/Or	
27894	Unlisted Procedure, Leg Or Ankle	\$542.22 Price By Report
	Drainage Of Fluid-Filled Sac (Bursa) Of Foot, Superficial	\$165.02
	Drainage Of Fluid-Filled Sac (Bursa) Of Foot, Deep	\$263.57
	Deep Infection, Below Fascia, Requiring Deep Dissection, With Or Without Tendon Sheath Involvement; Multiple Areas	\$398.33
	Incision, Bone Cortex (Eg, Osteomyelitis Or Bone Abscess), Foot	\$496.07
28008	Fasciotomy, Foot And/Or Toe	\$297.43
28010	Repair Of Toe Tendon, Accessed Through The Skin	\$207.42
	Repair Of Multiple Toe Tendons, Accessed Through The Skin	\$293.96
	Incision Of Foot Bone At Ankle Joint With Exploration, Drainage, Or Removal Of Foreign Body	\$519.10
	Exploration, Drainage, Or Removal Of Foreign Body Of Foot	\$336.98
	Exploration, Drainage, Or Removal Of Foreign Body Of Toe Joint	\$408.08
	Release, Tarsal Tunnel (Posterior Tibial Nerve Decompression)	\$468.26
	1.5 Cm Or Greater	\$509.90
	Excision, Tumor, Soft Tissue Of Foot Or Toe, Subfascial (Eg, Intramuscular); 1. 5 Cm Or Greater	\$483.98
	Excision, Tumor, Soft Tissue Of Foot Or Toe, Subcutaneous; Less Than 1.5 Cm Excision, Tumor, Soft Tissue Of Foot Or Toe, Subfascial (Eg, Intramuscular); Less Than 1.5 Cm	\$341.42 \$450.66
	Removal (Less Than 3 Centimeters) Tissue Growth Of Foot Or Toe	\$450.66 \$655.34
	Removal (3 Centimeters Or Greater) Tissue Growth Of Foot Or Toe	\$939.95
	Biopsy Through A Joint Opening In The Midfoot	\$394.00
	Biopsy Through A Joint Opening In The Toe/Forefoot Joint	\$369.69
	Arthrotomy For Synovial Biopsy; Interphalangeal Joint	\$348.19
	Neurectomy, Intrinsic Musculature Of Foot	\$354.44
	Fasciectomy, Plantar Fascia; Partial (Separate Procedure)	\$448.13
28062	Fasciectomy, Excision Of Plantar Fascia; Radical (Separate Procedure)	\$536.92
28070	Synovectomy; Intertarsal Or Tarsometatarsal Joint, Each	\$485.91
28072	Synovectomy; Metatarsophalangeal Joint, Each	\$463.43
	Excision, Interdigital (Morton) Neuroma, Single, Each	\$368.78
	Removal Of Lining Of The Foot Tendon On The Under Surface Of The Foot	\$506.32
	Removal Of Lining Of The Foot Tendon On The Upper Surface Of The Foot	\$431.76
	Excision Of Lesion, Tendon, Tendon Sheath, Or Capsule (Including Synovectomy) (Eg, Cyst Or Ganglion); Foot	\$321.91
	Excision Of Lesion, Tendon, Tendon Sheath, Or Capsule (Including Synovectomy) (Eg, Cyst Or Ganglion); Toe(S), Each	\$375.27
20100	Excision Or Curettage Of Bone Cyst Or Benign Tumor, Talus Or Calcaneus; Excision Or Curettage Of Bone Cyst Or Benign Tumor, Talus Or Calcaneus; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining	\$554.86
28102		\$560.82
	Excision Or Curettage Of Bone Cyst Or Benign Tumor, Talus Or Calcaneus; With Homogenous Bone Graft	\$360.75
	Excision Or Curettage Of Bone Cyst Or Benign Tumor, Tarsal Or Metatarsal, Except Talus Or Calcaneus;	\$464.03
	Excision Or Curettage Of Bone Cyst Or Benign Tumor, Tarsal Or Metatarsal Bones, Except Talus Or Calcaneus; With Iliac Or Other	*
28106	Autogenous Bone Graft (Includes Obtaining Graft)	\$396.29
28107	Excision Or Curettage Of Bone Cyst Or Benign Tumor, Tarsal Or Metatarsal Bones, Except Talus Or Calcaneus; With Homogenous Bone Graft	\$477.23
	Excision Or Curettage Of Bone Cyst Or Benign Tumor, Phalanges;	\$411.03
28110	Ostectomy, Partial Excision, Fifth Metatarsal Head (Bunionette) (Separate Procedure)	\$319.34
	Ostectomy; Complete Excision Of First Metatarsal Head	\$478.36
	Removal Of Bones At Second, Third, Or Fourth Toe Joints	\$341.97
28113	Ostectomy; Fifth Metatarsal Head	\$404.13
28114	Ostectomy, Complete Excision; All Metatarsal Heads, With Partial Proximal Phalangectomy, Excluding First Metatarsal (Eg, Clayton Type Procedure)	\$995.58
	Ostectomy, Excision Of Tarsal Coalition	\$688.70
	Ostectomy, Calcaneus; Partial (Cotton Scoop Type Procedure)	\$622.16
	Ostectomy, Calcaneus; For Spur, With Or Without Plantar Fascial Release	\$475.66
28120	Partial Removal Of Foot Or Heel Bone For Bone Infection In The Mid Hindfoot Area	\$463.10
28122	Partial Removal Of Foot Or Heel Bone For Bone Infection In The Midfoot Area	\$469.64
	Partial Excision (Craterization, Saucerization, Sequestrectomy, Or Diaphysectomy) Bone (Eg, Osteomyelitis Or Bossing); Phalanx Of Toe	\$333.59
	Resection, Partial Or Complete, Phalangeal Base, Each Toe	\$290.02
	Talectomy (Astragalectomy)	\$602.31
	Metatarsectomy Photography Too Food Too	\$477.46
	Phalangectomy, Toe, Each Toe Resection, Condyle(S), Distal End Of Phalanx, Each Toe	\$394.36 \$385.84
	Hemiphalangectomy Or Interphalangeal Joint Excision, Toe, Proximal End Of Phalanx, Each	\$385.84 \$389.34
	Extensive Removal Of Bone Growth, Middle Portion Of Foot	\$1,000.26
	Radical Resection Of Tumor; Metatarsal	\$671.66
	Radical Resection Of Tumor; Phalanx Of Toe	\$435.24
	Removal Of Foreign Body Of Foot Tissue, Accessed Beneath The Skin	\$239.35
	Removal Of Foreign Body Of Foot Tissue, Deep	\$319.50
	Removal Of Foreign Body Of Foot Tissue, Complicated	\$361.66
28200	Repair Of Foot Tendon On The Sole Of The Foot Without A Graft	\$394.97
	Repair Of Foot Tendon On The Sole Of The Foot With A Graft	\$560.40
	Repair Of Foot Tendon On The Top Side Of The Foot Without A Graft	\$334.17

	Description	Fee
	Repair Of Foot Tendon On The Top Side Of The Foot With A Graft Release Of Single Foot Tendon On The Bottom Side Of The Foot (Flexor Tendon)	\$550.82 \$425.78
	Tenolysis, Flexor, Foot; Multiple Tendons	\$490.49
	Release Of Single Foot Tendon On The Top Side Of The Foot (Extensor)	\$443.97
	Tenolysis, Extensor, Foot; Multiple Tendons	\$582.54
	Incision To Lengthen Foot Tendons, Open Procedure	\$409.19
	Incision To Lengthen Toe Tendon, Open Procedure	\$263.35
	Incision To Release Foot Tendon, Open Procedure	\$364.37
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28238	Reconstruction (Advancement), Posterior Tibial Tendon With Excision Of Accessory Tarsal Navicular Bone (Eg, Kidner Type Procedure)	\$699.56
	Tenotomy Or Release, Abductor Hallucis Muscle (Mccauley Type Procedure)	\$421.07
28250	Division Of Plantar Fascia And Muscle (Eg, Steindler Stripping) (Separate Procedure)	\$545.07
28260	Capsulotomy, Midfoot; Medial Release Only (Separate Procedure)	\$663.38
	Capsulotomy, Midfoot; With Tendon Lengthening	\$814.60
28262	Capsulotomy, Midfoot; Extensive, Including Posterior Talotibial Capsulotomy And Tendon(S) Lengthening (Eg, Resistant Clubfoot Deformity)	\$1,009.46
28264	Capsulotomy, Midtarsal (Eg, Heyman Type Procedure)	\$841.20
28270	Capsulotomy; Metatarsophalangeal Joint, With Or Without Tenorrhaphy, Each Joint (Separate Procedure)	\$431.51
28272	Capsulotomy; Interphalangeal Joint, Each Joint (Separate Procedure)	\$363.69
28280	Syndactylization, Toes (Eg, Webbing Or Kelikian Type Procedure)	\$481.97
28285	Correction, Hammertoe (Eg, Interphalangeal Fusion, Partial Or Total Phalangectomy)	\$370.97
28286	Correction, Cock-Up Fifth Toe, With Plastic Skin Closure (Eg, Ruiz-Mora Type Procedure)	\$418.23
28288	Ostectomy, Partial, Exostectomy Or Condylectomy, Metatarsal Head, Each Metatarsal Head	\$418.07
	Correction Of Rigid Deformity Of First Joint Of Big Toe	\$731.35
	Correction Of Rigid Deformity Of First Joint Of Big Toe Using Implant	\$667.60
	Correction Of Bunion	\$553.02
	Correction Of Bunion With Alignment Correction Of Midfoot Bone Toward Ankle	\$1,034.65
28296	Correction Of Bunion With Alignment Correction Of Midfoot Bone Toward Toe Area	\$777.21
	Correction Of Bunion With Forefoot And Midfoot Bone Fusion	\$740.37
28298	Correction Of Bunion With Alignment Correction Of Big Toe	\$678.10
28299	Correction Of Bunion With 2 Areas Of Realignment	\$857.22
28300	Osteotomy; Calcaneus (Eg, Dwyer Or Chambers Type Procedure), With Or Without Internal Fixation	\$655.47
	Osteotomy; Talus	\$654.30
28304	Osteotomy, Tarsal Bones, Other Than Calcaneus Or Talus;	\$631.04
	Osteotomy, Tarsal Bones, Other Than Calcaneus Or Talus; With Autograft (Includes Obtaining Graft) (Eg, Fowler Type)	\$623.87
28306	Incision To Straighten Big Toe Bone At The First Midfoot Bone (Metatarsal) Level	\$464.44
	Osteotomy, With Or Without Lengthening, Shortening Or Angular Correction, Metatarsal; First Metatarsal With Autograft (Other Than First Toe)	\$737.82
28308	Incision To Straighten Toe Bone (Other Than The Big Toe) At The Midfoot Bone (Metatarsal) Level	\$472.10
	Osteotomy, With Or Without Lengthening, Shortening Or Angular Correction, Metatarsal; Multiple (Eg, Swanson Type Cavus Foot Procedure)	\$815.39
	Incision To Straighten Big Toe Bone At The First Toe Bone Level	\$481.52
	Incision To Straighten Toe Bone (Other Than The Big Toe) At Toe Bone Level	\$489.37
	Reconstruction, Angular Deformity Of Toe, Soft Tissue Procedures Only (Eg, Overlapping Second Toe, Fifth Toe, Curly Toes)	\$496.40
	Sesamoidectomy, First Toe (Separate Procedure)	\$332.33
	Repair Of Non-Healed Midfoot Bone	\$622.77
	Repair Of Non-Healed Forefoot Bone	\$732.80
	Reconstruction Of Abnormal Toe, Without Bone Removal	\$533.97
	Reconstruction Of Abnormal Toe, With Bone Removal	\$617.85
	Reconstruction, Toe(S) Polydactyly	\$322.46
	Reconstruction, Toe(S) Syndactyly, With Or Without Skin Graft(S), Each Web	\$457.39
	Reconstruction, Cleft Foot	\$1,002.08
	Closed Treatment Of Calcaneal Fracture; Without Manipulation	\$223.28
	Closed Treatment Of Calcaneal Fracture; With Manipulation	\$401.84
	Insertion Of Hardware To Broken Heel Bone With Manipulation, Accessed Through The Skin	\$525.42
28415	Open Treatment Of Calcaneal Fracture, Includes Internal Fixation, When Performed;	\$944.15
20.400	Open Treatment Of Calcaneal Fracture, Includes Internal Fixation, When Performed; With Primary Iliac Or Other Autogenous Bone Graft	64 400 00
	(Includes Obtaining Graft)	\$1,186.88
	Closed Treatment Of Talus Fracture; Without Manipulation	\$186.10
	Treatment Of Closed Talus Fracture; With Manipulation	\$331.58
	Insertion Of Hardware To Broken Ankle Joint With Manipulation, Accessed Through The Skin	\$465.59
	Open Treatment Of The Bone That Connects The Foot To The Ankle	\$898.41
	Implantation Of Donor Cartilage Cells Into Foot Joint With Grafts, Open Procedure	\$1,109.61
	Treatment Of Broken Foot Bone Without Manipulation	\$153.03
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20452	Treatment Of Broken Foot Bone With Manipulation	\$274.88
	Insertion Of Hardware To Broken Foot Joint With Manipulation, Accessed Through The Skin	\$351.82
28465	Insertion Of Hardware To Broken Foot Joint With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Hind Portion Of The Foot	\$351.82 \$510.62
28465 28470	Insertion Of Hardware To Broken Foot Joint With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Hind Portion Of The Foot Closed Treatment Of Broken Foot Bone In The Fore Or Midfoot Without Manipulation	\$351.82 \$510.62 \$228.56
28465 28470 28475	Insertion Of Hardware To Broken Foot Joint With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Hind Portion Of The Foot Closed Treatment Of Broken Foot Bone In The Fore Or Midfoot Without Manipulation Treatment Of Closed Metatarsal Fracture; With Manipulation, Each	\$351.82 \$510.62 \$228.56 \$228.56
28465 28470 28475 28476	Insertion Of Hardware To Broken Foot Joint With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Hind Portion Of The Foot Closed Treatment Of Broken Foot Bone In The Fore Or Midfoot Without Manipulation Treatment Of Closed Metatarsal Fracture; With Manipulation, Each Insertion Of Hardware To Broken Foot Bone With Manipulation, Accessed Through The Skin	\$351.82 \$510.62 \$228.56 \$228.56 \$408.70
28465 28470 28475 28476 28485	Insertion Of Hardware To Broken Foot Joint With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Hind Portion Of The Foot Closed Treatment Of Broken Foot Bone In The Fore Or Midfoot Without Manipulation Treatment Of Closed Metatarsal Fracture; With Manipulation, Each Insertion Of Hardware To Broken Foot Bone With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Mid Portion Of The Foot	\$351.82 \$510.62 \$228.56 \$228.56 \$408.70 \$419.58
28465 28470 28475 28476 28485 28490	Insertion Of Hardware To Broken Foot Joint With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Hind Portion Of The Foot Closed Treatment Of Broken Foot Bone In The Fore Or Midfoot Without Manipulation Treatment Of Closed Metatarsal Fracture; With Manipulation, Each Insertion Of Hardware To Broken Foot Bone With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Mid Portion Of The Foot Closed Treatment Of Fracture Great Toe, Phalanx Or Phalanges; Without Manipulation	\$351.82 \$510.62 \$228.56 \$228.56 \$408.70 \$419.58 \$98.06
28465 28470 28475 28476 28485 28490 28495	Insertion Of Hardware To Broken Foot Joint With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Hind Portion Of The Foot Closed Treatment Of Broken Foot Bone In The Fore Or Midfoot Without Manipulation Treatment Of Closed Metatarsal Fracture; With Manipulation, Each Insertion Of Hardware To Broken Foot Bone With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Mid Portion Of The Foot Closed Treatment Of Fracture Great Toe, Phalanx Or Phalanges; Without Manipulation Treatment Of Closed Fracture Great Toe, Phalanx Or Phalanges; With Manipulation	\$351.82 \$510.62 \$228.56 \$228.56 \$40.77 \$419.58 \$98.06 \$169.39
28465 28470 28475 28476 28485 28490 28495 28496	Insertion Of Hardware To Broken Foot Joint With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Hind Portion Of The Foot Closed Treatment Of Broken Foot Bone In The Fore Or Midfoot Without Manipulation Treatment Of Closed Metatarsal Fracture; With Manipulation, Each Insertion Of Hardware To Broken Foot Bone With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Mid Portion Of The Foot Closed Treatment Of Fracture Great Toe, Phalanx Or Phalanges; Without Manipulation Treatment Of Closed Fracture Great Toe, Phalanx Or Phalanges; With Manipulation Insertion Of Hardware To Broken Great Toe With Manipulation, Accessed Through The Skin	\$351.82 \$510.62 \$228.56 \$228.56 \$408.70 \$419.58 \$98.06 \$169.39 \$408.55
28465 28470 28475 28476 28485 28490 28495 28496 28505	Insertion Of Hardware To Broken Foot Joint With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Hind Portion Of The Foot Closed Treatment Of Broken Foot Bone In The Fore Or Midfoot Without Manipulation Treatment Of Closed Metatarsal Fracture; With Manipulation, Each Insertion Of Hardware To Broken Foot Bone With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Mid Portion Of The Foot Closed Treatment Of Fracture Great Toe, Phalanx Or Phalanges; Without Manipulation Treatment Of Closed Fracture Great Toe, Phalanx Or Phalanges; With Manipulation Insertion Of Hardware To Broken Great Toe With Manipulation, Accessed Through The Skin Open Treatment Of Fracture, Great Toe, Phalanx Or Phalanges, Includes Internal Fixation, When Performed	\$351.82 \$510.62 \$228.56 \$228.56 \$408.70 \$419.58 \$98.06 \$169.39 \$408.55
28465 28470 28475 28476 28485 28490 28495 28496 28505 28510	Insertion Of Hardware To Broken Foot Joint With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Hind Portion Of The Foot Closed Treatment Of Broken Foot Bone In The Fore Or Midfoot Without Manipulation Treatment Of Closed Metatarsal Fracture; With Manipulation, Each Insertion Of Hardware To Broken Foot Bone With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Mid Portion Of The Foot Closed Treatment Of Fracture Great Toe, Phalanx Or Phalanges; Without Manipulation Treatment Of Closed Fracture Great Toe, Phalanx Or Phalanges; With Manipulation Insertion Of Hardware To Broken Great Toe With Manipulation, Accessed Through The Skin	\$351.82 \$510.62 \$228.56 \$228.56 \$408.70 \$419.58 \$98.06 \$169.39 \$408.55

28530		F
28530	Description Open Treatment Of Fracture, Phalanx Or Phalanges, Other Than Great Toe, Includes Internal Fixation, When Performed, Each	Fee \$503.96
	Closed Treatment Of A Small Bone In A Tendon In The Foot	\$503.96 \$107.75
28531	Open Treatment Of Fracture Of Fracture Of A Small Bone Within A Tendon In The Foot	\$314.70
	Closed Treatment Of Tarsal Bone Dislocation, Other Than Talotarsal; Without Anesthesia	\$184.97
	Treatment Of Closed Tarsal Bone Dislocation; Requiring Anesthesia	\$291.08
	Insertion Of Hardware To Foot Joint Dislocation With Manipulation, Accessed Through The Skin, Other Than The Ankle (Talus) To The Midfoot	
28546	(Tarsal) Bones	\$559.97
28555	Open Treatment Of Dislocation Foot Joint Within The Hindfoot Bones	\$801.91
28570	Closed Treatment Of Dislocated Hindfoot Without Anesthesia	\$221.77
28575	Closed Treatment Of Dislocated Hindfoot With Anesthesia	\$339.09
	Insertion Of Hardware To Foot Joint Dislocation With Manipulation, Accessed Through The Skin Of The Ankle (Talus) With The Midfoot (Tarsal)	
	Bones	\$354.49
	Open Treatment Of Dislocation Foot Joint Within The Midfoot Bones	\$827.44
	Closed Treatment Of Dislocated Midfoot Without Anesthesia	\$197.47
28605	Closed Treatment Of Dislocated Midfoot With Anesthesia	\$235.94
	Insertion Of Hardware To Foot Joint Dislocation With Manipulation, Accessed Through The Skin Of The Midfoot (Tarsal) Bones Joint With The	
	Forefoot (Metatarsal) Bones	\$389.83
	Open Treatment Of Dislocation At The Connection Of The Midfoot To The Forefoot	\$560.89
	Closed Treatment Of Metatarsophalangeal Joint Dislocation; Without Anesthesia	\$111.90
	Treatment Of Closed Metatarsophalangeal Joint Dislocation; Requiring Anesthesia	\$163.51
	Insertion Of Hardware To Foot Bone Dislocation With Manipulation, Accessed Through The Skin	\$296.03
	Open Treatment Of Metatarsophalangeal Joint Dislocation, Includes Internal Fixation, When Performed	\$574.05
	Closed Treatment Of Interphalangeal Joint Dislocation; Without Anesthesia	\$83.94
	Treatment Of Closed Interphalangeal Joint Dislocation; Requiring Anesthesia	\$141.26
	Insertion Of Hardware To Toe Joint Dislocation With Manipulation, Accessed Through The Skin	\$167.53
	Open Treatment Of Interphalangeal Joint Dislocation, Includes Internal Fixation, When Performed	\$511.42
	Fusion Of All Bones Of The Ankle And Hindfoot	\$1,114.21
	Fusion Of Three Major Bones Of The Hindfoot	\$956.80
	Fusion Of Foot Below The Ankle, Simple	\$792.45
28730	Fusion Of Multiple Foot Joints Without A Bone Incision	\$747.89
28735	Fusion Of Multiple Foot Joints With A Bone Incision	\$718.10
28737	Fusion Of Foot Below The Ankle, Complex	\$745.49
28740	Fusion Of Foot In The Midfoot Region	\$580.59
28750	Fusion Of Great Toe At The Joint With The Foot	\$539.34
28755	Fusion Of Great Toe, Between The Toe Joints	\$447.72
28760	Fusion Of Great Toe, Between The Toe Joints With Tendon Transfer	\$716.09
28800	Amputation Of Midfoot Bone	\$542.06
28805	Amputation Of Foot Across Instep	\$594.41
	Amputation Of Toe And Midfoot Bone	\$408.50
	Amputation Of Toe At Joint Between The Forefoot And Toes	\$314.16
	Amputation Of Toe At Toe Joints	\$235.17
	Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other	*
28890	Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia	
	Unlisted Procedure, Foot Or Toes	\$324.39
29000		Price By Report
	Application Of Halo Type Body Cast (See 20661-20663 For Insertion)	Price By Report \$318.92
29010	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only	Price By Report \$318.92 \$243.77
29010 29015	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head	Price By Report \$318.92 \$243.77 \$269.26
29010 29015 29035	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips;	Price By Report \$318.92 \$243.77 \$269.26 \$236.40
29010 29015 29035 29040	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23
29010 29015 29035 29040 29044	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh	\$324.39 Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10
29010 29015 29035 29040 29044 29046	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21
29010 29015 29035 29040 29044 29046 29049	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21
29010 29015 29035 29040 29044 29046 29049 29055	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11
29010 29015 29035 29040 29044 29046 29049 29055 29058	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11
29010 29015 29035 29040 29044 29046 29049 29055 29058 29065	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm)	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72
29010 29015 29035 29040 29044 29046 29049 29055 29058 29065 29075	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm)	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70
29010 29015 29035 29040 29044 29046 29055 29058 29065 29075 29085	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application; Hand And Lower Forearm (Gauntlet)	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50
29010 29015 29035 29040 29044 29046 29049 29055 29058 29065 29075 29085	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application; Hand And Lower Forearm (Gauntlet) Application, Cast; Finger (Eg, Contracture)	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$97.35
29010 29015 29035 29040 29044 29046 29055 29058 29065 29075 29085 29086 29105	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application, Last; Finger (Eg, Contracture) Application Of Long Arm Splint (Shoulder To Hand)	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$97.35 \$71.21
29010 29015 29035 29040 29044 29046 29055 29055 29065 29075 29086 29086 29105 29105	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application, Cast; Finger (Eg, Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand)	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$97.35 \$77.21 \$83.53
29010 29015 29035 29040 29044 29046 29055 29055 29065 29075 29075 29086 29105 29125 29125	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application, Cast; Finger (Eg, Contracture) Application, Cast; Finger (Eg, Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Short Arm Splint (Forearm To Hand)	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$97.35 \$77.21 \$83.53 \$67.63
29010 29015 29035 29040 29044 29046 29055 29058 29065 29075 29086 29105 29126 29126 29126	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application; Hand And Lower Forearm (Gauntlet) Application, Cast; Finger (Eg, Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Non-Moveable, Hinged Finger Splint	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$97.35 \$71.21 \$83.53 \$67.63
29010 29015 29035 29040 29044 29049 29055 29058 29065 29075 29086 29105 29105 29125 29125 29125 29125 29125 29130	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application, Shoulder Spica Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application; Hand And Lower Forearm (Gauntlet) Application, Cast; Finger (Eg, Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Non-Moveable, Hinged Finger Splint Application Of Moveable, Hinged Finger Splint	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$97.35 \$71.21 \$83.53 \$67.63 \$52.64 \$41.83
29010 29015 29035 29040 29044 29046 29055 29058 29065 29075 29086 29105 29126 29126 29126 29130 29131	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application; Hand And Lower Forearm (Gauntlet) Application, Cast; Finger (Eg, Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Mon-Moveable, Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Application Of Moveable, Hinged Finger Splint Strapping; Thorax	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$97.35 \$71.21 \$83.53 \$67.63 \$52.64 \$41.83 \$39.77
29010 29015 29035 29040 29044 29049 29055 29058 29065 29075 29086 29105 29125 29126 29131 29131 29200 29240	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast, Figure-Of-Eight Application, Cast, Figure-Of-Eight Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application; Hand And Lower Forearm (Gauntlet) Application, Cast; Finger (Eg, Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Shoulder (Eg, Velpeau)	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$97.35 \$71.21 \$83.53 \$67.63 \$52.64 \$41.83 \$331.62 \$31.87
29010 29015 29035 29040 29044 29049 29055 29058 29065 29075 29086 29105 29125 29126 29130 29131 29200 29240 29260	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application; Hand And Lower Forearm (Gauntlet) Application, Cast; Finger (Eg. Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Shoulder (Eg, Velpeau) Strapping; Elbow Or Wrist	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$97.35 \$71.21 \$83.53 \$67.63 \$52.64 \$41.83 \$33.77 \$31.62 \$31.87
29010 29015 29035 29040 29044 29049 29055 29058 29065 29075 29086 29105 29125 29126 29130 29131 29200 29240 29240 29280	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application, Cast; Figure-Of-Eight Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Shoulder To Hand (Long Arm) Application; Hand And Lower Forearm (Gauntlet) Application; Cast; Finger (Eg, Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Non-Moveable, Hinged Finger Splint Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Blow Or Wrist Strapping; Elbow Or Wrist Strapping; Hand Or Finger	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.13 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$97.35 \$77.21 \$83.53 \$67.63 \$52.64 \$41.83 \$39.77 \$31.62 \$31.87 \$32.87
29010 29015 29035 29040 29044 29046 29055 29058 29065 29075 29086 29105 29125 29126 29130 29131 29200 29260 29280 29280 29305	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application; Hand And Lower Forearm (Gauntlet) Application; Cast; Finger (Eg, Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Application Of Non-Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Thorax Strapping; Shoulder (Eg, Velpeau) Strapping; Hand Or Finger Application Of Hip Spica Cast One Leg	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$97.35 \$77.21 \$83.53 \$67.63 \$52.64 \$41.83 \$39.77 \$31.62 \$31.62 \$31.87 \$22.7.69
29010 29015 29035 29040 29044 29046 29055 29058 29065 29075 29085 29105 29125 29126 29130 29131 29200 29240 29260 29280 29280 29305	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Shoulder To Hand (Long Arm) Application, Cast; Finger (Eg. Contracture) Application, Cast; Finger (Eg. Contracture) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Non-Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Shoulder (Eg., Velpeau) Strapping; Elbow Or Wrist Strapping; Elbow Or Wrist Strapping; Elbow Or Wist Application Of Hip Spica Cast One Leg Application Of Hip Spica Cast, One And One-Half Hip Spica Or Both Legs	Price By Repor \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$97.35 \$71.21 \$83.53 \$67.63 \$141.83 \$39.77 \$31.62 \$31.87 \$32.87
29010 29015 29035 29040 29044 29046 29049 29055 29065 29075 29086 29105 29125 29126 29130 29131 29200 29240 29280 29280 29305 29305 29305 29305 29305 29305	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Roser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application, Shoulder Spica Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application Of Cast, Elbow To Finger (Gauntlet) Application, Cast; Finger (Eg, Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Long Arm Splint (Shoulder To Hand) Application Of Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Application Of Non-Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Thorax Strapping; Elbow Or Wrist Strapping; Elbow Or Wrist Strapping; Hand Or Finger Application Of Hip Spica Cast, One And One-Half Hip Spica Or Both Legs Application Of Hip Spica Cast, Choe And One-Half Hip Spica Or Both Legs Application Of Hip Spica Cast, Choe And One-Half Hip Spica Or Both Legs Application Of Hip Spica Cast, Choe And One-Half Hip Spica Or Both Legs	Price By Repor \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.77 \$91.50 \$97.35 \$71.21 \$83.53 \$67.63 \$52.64 \$41.83 \$39.77 \$31.62 \$31.87 \$27.59 \$227.04
29010 29015 29035 29040 29044 29049 29055 29058 29065 29075 29086 29105 29125 29130 29131 29200 29240 29280 29305 29305 29325 29325 29325	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application, Cast; Figure-Of-Eight Application, Shoulder Spica Application; Plaster Velpeau Application; Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application Of Cast, Elbow To Finger (Short Arm) Application, Cast; Finger (Eg, Contracture) Application, Cast; Finger (Eg, Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Non-Moveable, Hinged Finger Splint Application Of Non-Moveable, Hinged Finger Splint Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Thorax Strapping; Shoulder (Eg, Velpeau) Strapping; Elbow Or Wrist Strapping; Hand Or Finger Application Of Hip Spica Cast One Leg Application Of Long Leg Cast (Thigh To Toes), Walker Or Ambulatory Type	Price By Repor \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.55 \$71.21 \$83.53 \$67.63 \$52.64 \$41.83 \$39.77 \$31.62 \$31.87 \$22.7.69 \$12.7.69 \$12.7.69
29010 29015 29035 29040 29044 29049 29055 29058 29065 29075 29086 29105 29125 29126 29130 29240 29260 29280 29305 29325 29345 29355	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Only Application Of Rosy Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application, Cast; Figure-Of-Eight Application; Plaster Velpeau Application of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application, Cast; Finger (Eg. Contracture) Application, Cast; Finger (Eg. Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Non-Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Blow Or Wrist Strapping; Blow Or Wrist Strapping; Blow Or Wrist Strapping; Blow Or Finger Application Of Hip Spica Cast, One And One-Half Hip Spica Or Both Legs Application Of Long Leg Cast (Thigh To Toes); Application Of Long Leg Cast (Thigh To Toes); Application Of Long Leg Cast Brace	Price By Repor \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$67.63 \$52.64 \$41.83 \$33.75 \$31.62 \$31.87 \$27.59 \$227.04 \$183.78 \$142.41
29010 29015 29035 29040 29044 29049 29055 29055 29065 29075 29086 29105 29125 29126 29130 29130 29240 29260 29280 29280 29305 29325 29358 29358 29358	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application, Shoulder Spica Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application Of Cast, Elbow To Finger (Short Arm) Application Cast; Finger (Eg., Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Non-Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Thorax Strapping; Blow Or Wrist Strapping; Cast One Leg Application Of Long Leg Cast (Thigh To Toes); Application Of Long Leg Cast (Thigh To Toes), Walker Or Ambulatory Type Application Of Cong Leg Cast (Thigh To Toes), Walker Or Ambulatory Type Application Of Long Leg Cast (Thigh To Toes), Walker Or Ambulatory Type Application Of Cong Leg Cast (Thigh To Ankle)	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$97.35 \$71.21 \$83.53 \$67.63 \$52.64 \$41.83 \$33.77 \$31.62 \$31.87 \$22.7.94 \$183.78 \$142.41 \$112.60
29010 29015 29035 29040 29044 29046 29049 29055 29065 29075 29086 29105 29125 29126 29130 29130 29240 29240 29280 29280 29305 29325 2935 2935 2935 2935 2935 2935 29	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Plaster Velpeau Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application Of Cast, Elbow To Finger (Short Arm) Application, Hand And Lower Forearm (Gauntlet) Application, Cast; Finger (Eg, Contracture) Application Of Long Arm Splint (Forearm To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Thorax Strapping; Shoulder (Eg, Velpeau) Strapping; Blow Or Wrist Strapping; Blow Or Wrist Strapping; Hand Or Finger Application Of Hip Spica Cast One Leg Application Of Long Leg Cast (Thigh To Toes); Application Of Long Leg Cast (Thigh To Toes), Walker Or Ambulatory Type Application Of Cylinder Cast (Below Knee To Toes);	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$97.35 \$71.21 \$83.53 \$67.63 \$52.64 \$41.83 \$33.87 \$31.62 \$31.87 \$27.59 \$227.04 \$183.78 \$144.91
29010 29015 29035 29040 29044 29049 29055 29058 29065 29075 29086 29105 29125 29126 29130 29131 29200 29240 29280 29280 29305 29325 29358 29358 29358 29358 29358 29358 29358	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application, Shoulder Spica Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application Of Cast, Elbow To Finger (Short Arm) Application Cast; Finger (Eg., Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Non-Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Thorax Strapping; Blow Or Wrist Strapping; Cast One Leg Application Of Long Leg Cast (Thigh To Toes); Application Of Long Leg Cast (Thigh To Toes), Walker Or Ambulatory Type Application Of Cong Leg Cast (Thigh To Toes), Walker Or Ambulatory Type Application Of Long Leg Cast (Thigh To Toes), Walker Or Ambulatory Type Application Of Cong Leg Cast (Thigh To Ankle)	Price By Repor \$318.92 \$243.77 \$269.26 \$236.40 \$269.25 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$97.36 \$67.63 \$52.64 \$41.83 \$39.77 \$31.62 \$31.87 \$227.04 \$183.78 \$144.91 \$112.60 \$81.82
29010 29015 29035 29040 29046 29049 29055 29065 29075 29085 29075 29185 29186 29105 29125 29130 29131 29200 29240 29280 29305 29305 29305 29305 29355 29355 29358 29365 29405 29405 29365 29365 29365 29365 29365 29405 29405	Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Plaster Velpeau Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application Of Cast, Elbow To Finger (Short Arm) Application, Hand And Lower Forearm (Gauntlet) Application, Cast; Finger (Eg, Contracture) Application Of Long Arm Splint (Forearm To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Thorax Strapping; Shoulder (Eg, Velpeau) Strapping; Blow Or Wrist Strapping; Blow Or Wrist Strapping; Hand Or Finger Application Of Hip Spica Cast One Leg Application Of Long Leg Cast (Thigh To Toes); Application Of Long Leg Cast (Thigh To Toes), Walker Or Ambulatory Type Application Of Cylinder Cast (Below Knee To Toes);	Price By Report \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.70 \$91.50 \$97.35 \$67.63 \$52.64 \$41.83 \$33.67 \$31.87 \$32.87 \$27.56 \$227.04 \$183.78 \$144.91 \$112.60

Code	Description	Fee
	Application Of Rigid Total Contact Leg Cast	\$132.25
29450	Application Of Clubfoot Cast With Molding Or Manipulation, Long Or Short Leg	\$149.59
	Application Of Long Leg Splint (Thigh To Ankle Or Toes)	\$83.03
	Application Of Short Leg Splint (Calf To Foot)	\$72.73
	Strapping; Hip Strapping; Knee	\$37.33
	Strapping, Ariee Strapping; Ankle And/Or Foot	\$28.69 \$29.89
	Strapping; Toes	\$17.89
	Strapping, Unna Boot	\$54.99
29581	Application Of Multi-Layer Compression System; Leg (Below Knee), Including Ankle And Foot	\$94.11
	Application Of Vein Wound Compression System Upper Arm, Forearm, Hand, And Fingers	\$80.24
	Removal Or Bivalving Of Gauntlet, Boot, Or Body Cast	\$41.84
	Removal Or Bivalving; Full Arm Or Full Leg Cast Removal Or Bivalving Of Shoulder, Hip Spica, Or Jacket Cast	\$42.65 \$110.99
	Repair Of Spica, Body Cast, Or Jacket	\$78.21
	Windowing Of Cast	\$42.97
29740	Wedging Of Cast (Except Clubfoot Casts)	\$89.92
	Wedging Of Clubfoot Cast	\$97.02
	Unlisted Procedure, Casting Or Strapping	Price By Report
	Arthroscopy, Temporomandibular Joint, Diagnostic, With Or Without Synovial Biopsy (Separate Procedure) Arthroscopy, Temporomandibular Joint, Surgical	\$486.48
	Diagnostic Examination Of Shoulder Using An Endoscope	\$562.23 \$431.34
	Incision Of Should Joint Capsule Using An Endoscope	\$1,063.43
	Repair Of Shoulder Socket Cartilage Using An Endoscope	\$1,063.43
	Removal Of Loose Or Foreign Body Of Shoulder Using An Endoscope	\$538.77
	Partial Removal Of Shoulder Joint Lining Using An Endoscope	\$492.69
	Removal Of Entire Shoulder Joint Lining Using An Endoscope	\$545.64
	Limited Removal Of Abnormal Shoulder Joint Tissue Using Endoscope Extensive Removal Of Abnormal Shoulder Joint Tissue Using Endoscope	\$552.52 \$603.72
	Partial Removal Of Collar Bone At Shoulder Using An Endoscope	\$686.79
	Release Or Removal Of Shoulder Scar Tissue Using An Endoscope	\$598.86
29826	Shaving Of Shoulder Bone Using An Endoscope	\$171.08
	Repair Of Shoulder Rotator Cuff Using An Endoscope	\$1,113.98
	Release Of Shoulder Biceps Tendon Using An Endoscope	\$940.79
	Arthroscopy, Elbow, Diagnostic, With Or Without Synovial Biopsy (Separate Procedure) Arthroscopy, Elbow, Surgical; With Removal Of Loose Body Or Foreign Body	\$420.59 \$452.95
	Arthroscopy, Elbow, Surgical, With Removal of Loose Body of Poleigh Body Arthroscopy, Elbow, Surgical; Synovectomy, Partial	\$467.50
	Arthroscopy, Elbow, Surgical, Synovectomy, Complete	\$537.76
29837	Arthroscopy, Elbow, Surgical; Debridement, Limited	\$540.76
	Arthroscopy, Elbow, Surgical; Debridement, Extensive	\$545.40
	Arthroscopy, Wrist, Diagnostic, With Or Without Synovial Biopsy (Separate Procedure)	\$417.09
	Diagnostic Examination Of The Wrist Using An Endoscope For Infection, Irrigation, And Drainage Arthroscopy, Wrist, Surgical Synovectomy, Partial	\$447.07 \$460.76
	Arthroscopy, Wrist, Surgical Synovectomy, Complete	\$538.93
	Arthroscopy, Wrist, Surgical Excision Of Triangular Fibrocartilage And/Or Joint Debridement	\$534.30
	Arthroscopy, Wrist, Surgical Internal Fixation For Fracture Or Instability	\$498.51
	Endoscopy, Wrist, Surgical, With Release Of Transverse Carpal Ligament	\$511.07
	Arthroscopically Aided Treatment Of Intercondylar Spine(S) And/Or Tuberosity Fracture(S) Of The Knee, With Or Without Manipulation; Without Internal Or External Fixation (Includes Arthroscopy)	\$570.65
	Arthroscopically Aided Treatment Of Intercondylar Spine(S) And/Or Tuberosity Fracture(S) Of The Knee, With Or Without Manipulation; Without	φ570.05
	Internal Or External Fixation (Includes Arthroscopy) With Internal Or External Fixation (Includes Arthroscopy)	\$990.02
	Treatment Of Broken Upper Portion Of The Leg Bone (Tibia) With Assistance Of An Endoscope On One Side	\$713.02
	Treatment Of Broken Upper Portion Of The Leg Bone (Tibia) With Assistance Of An Endoscope On Both Sides	\$900.43
	Arthroscopy, Hip, Diagnostic With Or Without Synovial Biopsy (Separate Procedure)	\$589.50 \$740.53
	Arthroscopy, Hip, Surgical; With Removal Of Loose Body Or Foreign Body Arthroscopy, Hip, Surgical; With Debridement/Shaving Of Articular Cartilage (Chondroplasty), Abrasion Arthroplasty, And/Or Resection Of	\$740.52
	Labrum	\$830.82
	Arthroscopy, Hip, Surgical; With Synovectomy	\$828.88
	Arthroscopy, Knee, Surgical; Osteochondral Autograft(S) (Eg, Mosaicplasty) (Includes Harvesting Of The Autograft[S])	\$956.82
	Donor Cartilage Graft At Knee Joint Using An Endoscope	\$1,158.51
	Arthroscopy, Knee, Surgical; Meniscal Transplantation (Includes Arthrotomy For Meniscal Insertion), Medial Or Lateral Arthroscopy, Knee, Diagnostic, With Or Without Synovial Biopsy (Separate Procedure)	\$1,504.90 \$379.82
	Arthroscopy, Knee, Surgical; For Infection, Lavage And Drainage	\$524.88
	Arthroscopy, Knee, Surgical; With Lateral Release	\$551.97
	Arthroscopy, Knee, Surgical; For Removal Of Loose Body Or Foreign Body (Eg, Osteochondritis Dissecans Fragmentation, Chondral	
	Fragmentation)	\$546.24
	Arthroscopy, Knee, Surgical; Synovectomy, Limited (Eg, Plica Or Shelf Resection) Arthroscopy, Knee, Surgical; Synovectomy, Major, Two Or More Compartments (Eg, Medial Or Lateral)	\$506.45 \$663.78
	parimoscopy, ranco, ourgical, cynovectorny, iviajor, i wo or iviore compartments (Eg. ivietial or Lateral)	
29877	Arthroscopy, Knee, Surgical: Debridement/Shaving Of Articular Cartilage (Chondroplasty)	あわるノ ロロリ
	Arthroscopy, Knee, Surgical; Debridement/Shaving Of Articular Cartilage (Chondroplasty) Repair Of Knee Joint With Drilling And Or Scraping Of The Joint	\$632.00 \$671.56
29879	Repair Of Knee Joint With Drilling And Or Scraping Of The Joint Arthroscopy, Knee, Surgical; With Meniscectomy (Medial And Lateral, Including Any Meniscal Shaving) Including Debridement/Shaving Of	\$671.56
29879 29880	Repair Of Knee Joint With Drilling And Or Scraping Of The Joint Arthroscopy, Knee, Surgical; With Meniscectomy (Medial And Lateral, Including Any Meniscal Shaving) Including Debridement/Shaving Of Articular Cartilage (Chondroplasty), Same Or Separate Compartment(S), When Performed	
29879 29880	Repair Of Knee Joint With Drilling And Or Scraping Of The Joint Arthroscopy, Knee, Surgical; With Meniscectomy (Medial And Lateral, Including Any Meniscal Shaving) Including Debridement/Shaving Of Articular Cartilage (Chondroplasty), Same Or Separate Compartment(S), When Performed Arthroscopy, Knee, Surgical; With Meniscectomy (Medial Or Lateral, Including Any Meniscal Shaving) Including Debridement/Shaving Of	\$671.56 \$572.80
29879 29880 29881	Repair Of Knee Joint With Drilling And Or Scraping Of The Joint Arthroscopy, Knee, Surgical; With Meniscectomy (Medial And Lateral, Including Any Meniscal Shaving) Including Debridement/Shaving Of Articular Cartilage (Chondroplasty), Same Or Separate Compartment(S), When Performed	\$671.56
29879 29880 29881 29882	Repair Of Knee Joint With Drilling And Or Scraping Of The Joint Arthroscopy, Knee, Surgical; With Meniscectomy (Medial And Lateral, Including Any Meniscal Shaving) Including Debridement/Shaving Of Articular Cartilage (Chondroplasty), Same Or Separate Compartment(S), When Performed Arthroscopy, Knee, Surgical; With Meniscectomy (Medial Or Lateral, Including Any Meniscal Shaving) Including Debridement/Shaving Of Articular Cartilage (Chondroplasty), Same Or Separate Compartment(S), When Performed	\$671.56 \$572.80 \$552.29

	Description	Fee
	Repair Of Knee Joint With Bone Graft Using An Endoscope, With Bone Graft	\$690.43
	Repair Of Knee Joint With Bone Graft Using An Endoscope, Without Bone Graft	\$581.79
	Arthroscopy, Knee, Surgical; Drilling For Intact Osteochondritis Dissecans Lesion With Internal Fixation Arthroscopically Aided Anterior Cruciate Ligament Repair/Augmentation Or Reconstruction	\$687.58
	Repair Of Posterior Cruciate Ligament Of Knee With Assistance Of An Endoscope	\$986.96 \$1,051.90
	Arthroscopy, Ankle, Surgical; Excision Of Osteochondral Defect Of Talus And/Or Tibia, Including Drilling Of The Defect	\$714.68
23031	Arthroscopically Aided Repair Of Large Osteochondritis Dissecans Lesion, Talar Dome Fracture, Or Tibial Plafond Fracture, With Or Without	ψ/ 14.00
29892	Internal Fixation (Includes Arthroscopy)	\$588.99
29893	Endoscopic Plantar Fasciotomy	\$602.01
	Arthroscopy, Ankle (Tibiotalar And Fibulotalar Joints), Surgical With Removal Of Loose Body Or Foreign Body	\$515.59
	Partial Removal Of Ankle Joint Lining Using An Endoscope With Removal Of The Joint Lining	\$479.79
	Arthroscopy, Ankle, Surgical; Debridement, Limited	\$503.81
	Arthroscopy, Ankle, Surgical; Debridement, Extensive	\$574.38
	Arthroscopy, Ankle (Tibiotalar And Fibulotalar Joints), Surgical; With Ankle Arthrodesis	\$925.10
	Arthroscopy, Metacarpophalangeal Joint, Diagnostic, Includes Synovial Biopsy Arthroscopy, Metacarpophalangeal Joint, Surgical; With Debridement	\$464.71 \$497.48
	Treatment Of Displaced Ligament Of Finger Joint Using An Endoscope	\$526.85
	Arthroscopy, Subtalar Joint, Surgical; With Removal Of Loose Body Or Foreign Body	\$583.34
	Arthroscopy, Subtalar Joint, Surgical; With Synovectomy	\$477.57
	Arthroscopy, Subtalar Joint, Surgical; With Debridement	\$600.13
29907	Arthroscopy, Subtalar Joint, Surgical; With Subtalar Arthrodesis	\$798.53
29914	Arthroscopy, Hip, Surgical; With Femoroplasty (le, Treatment Of Cam Lesion)	\$1,008.30
	Arthroscopy, Hip, Surgical; With Acetabuloplasty (le, Treatment Of Pincer Lesion)	\$1,035.52
	Arthroscopy, Hip, Surgical; With Labral Repair	\$1,029.43
	Unlisted Procedure, Arthroscopy Drainage Abases Or Hamstone, Need Internal Approach	\$1,674.19
	Drainage Abscess Or Hematoma, Nasal, Internal Approach Drainage Abscess Or Hematoma, Nasal Septum	\$261.39
	Biopsy, Intranasal	\$263.80 \$137.08
	Removal Of Polyps In Nose, Simple	\$239.82
	Removal Of Polyps in Nose, Extensive Or Complex	\$420.47
	Removal Or Destruction Of Growth In Nose, Internal Approach	\$703.46
	Removal Or Destruction Of Growth In Nose, External Approach	\$749.73
30120	Excision Or Surgical Planing Of Skin Of Nose For Rhinophyma	\$479.00
	Excision Dermoid Cyst, Nose; Simple, Skin, Subcutaneous	\$287.88
	Excision Dermoid Cyst, Nose; Complex, Under Bone Or Cartilage	\$623.02
	Excision Inferior Turbinate, Partial Or Complete, Any Method	\$295.05
	Removal Of Nasal Air Passage, Under The Lining Tissue	\$312.70
	Rhinectomy; Partial	\$759.68
	Rhinectomy; Total Injection Into Turbinate(S), Therapeutic	\$771.44 \$106.23
	Displacement Therapy (Proetz Type)	\$144.51
	Insertion, Nasal Septal Prosthesis (Button)	\$218.72
	Removal Foreign Body, Intranasal; Office Type Procedure	\$227.05
	Removal Foreign Body, Intranasal; Requiring General Anesthesia	\$221.18
30320	Removal Foreign Body, Intranasal; By Lateral Rhinotomy	\$467.83
30400	Rhinoplasty, Primary Lateral And Alar Cartilages And/Or Elevation Of Nasal Tip	\$1,174.70
	Reshaping Of Bone, Cartilage, Or Tip Of Nose	\$1,313.81
	Rhinoplasty, Primary Including Major Septal Repair	\$1,289.99
	Rhinoplasty, Secondary Minor Revision (Small Amount Of Nasal Tip Work)	\$1,034.08
	Rhinoplasty, Secondary Intermediate Revision (Bony Work With Osteotomies)	\$1,275.36
	Rhinoplasty, Secondary Major Revision (Nasal Tip Work And Osteotomies) Rhinoplasty For Nasal Deformity Secondary To Congenital Cleft Lip And/Or Palate, Including Columellar Lengthening; Tip Only	\$1,647.33
30460	Rhinoplasty For Nasal Deformity Secondary To Congenital Cleft Lip And/Or Palate, Including Columellar Lengthening, Tip, Only Rhinoplasty For Nasal Deformity Secondary To Congenital Cleft Lip And/Or Palate, Including Columellar Lengthening; Tip, Septum,	\$753.55
30462	Osteotomies	\$1,486.82
	Repair Of Nasal Vestibular Stenosis (Eg, Spreader Grafting, Lateral Nasal Wall Reconstruction)	\$1,013.43
	Repair Of Collapsed Nostril Using Implant In Side Of Nose	\$2,591.34
	Repair Of Collapsed Nasal Valve	\$2,297.07
30520	Septoplasty With Or Without Cartilage Implant (Separate Procedure)	\$714.26
	Repair Of Nasal Passage Through Nose	\$705.24
	Repair Of Nasal Passages Through Palate	\$954.24
	Release Of Nasal Scar Tissue	\$233.81
	Repair Fistula; Oromaxillary (Combine With 31030 If Antrotomy Is Included)	\$647.24
	Repair Fistula; Oronasal Septal Or Other Intranasal Dermatoplasty (Does Not Include Obtaining Graft)	\$460.56 \$650.10
	Repair Nasal Septal Perforations	\$638.39
30030	Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume	φ030.39
	Reduction); Superficial	\$156.35
30801		Ç
30801	Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg. Electrocautery, Radiofrequency Ablation, Or Tissue Volume	
		\$290.01
30802 30901	Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Intramural (Ie, Submucosal) Control Nasal Hemorrhage, Anterior, Simple (Limited Cautery And/Or Packing) Any Method	\$290.01 \$116.13
30802 30901 30903	Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Intramural (Ie, Submucosal) Control Nasal Hemorrhage, Anterior, Simple (Limited Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Anterior, Complex (Extensive Cautery And/Or Packing) Any Method	\$116.13 \$187.43
30802 30901 30903 30905	Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Intramural (Ie, Submucosal) Control Nasal Hemorrhage, Anterior, Simple (Limited Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Anterior, Complex (Extensive Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Posterior, With Posterior Nasal Packs And/Or Cautery, Any Method; Initial	\$116.13 \$187.43 \$250.33
30802 30901 30903 30905 30906	Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Intramural (Ie, Submucosal) Control Nasal Hemorrhage, Anterior, Simple (Limited Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Anterior, Complex (Extensive Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Posterior, With Posterior Nasal Packs And/Or Cautery, Any Method; Initial Control Nasal Hemorrhage, Posterior, With Posterior Nasal Packs; Initial Subsequent	\$116.13 \$187.43 \$250.33 \$357.62
30802 30901 30903 30905 30906 30915	Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Intramural (le, Submucosal) Control Nasal Hemorrhage, Anterior, Simple (Limited Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Anterior, Complex (Extensive Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Posterior, With Posterior Nasal Packs And/Or Cautery, Any Method; Initial Control Nasal Hemorrhage, Posterior, With Posterior Nasal Packs; Initial Subsequent Tying Of Artery (Ethmoidal) For Control Of Nose Bleed	\$116.13 \$187.43 \$250.33 \$357.62 \$569.17
30802 30901 30903 30905 30906 30915 30920	Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Intramural (Ie, Submucosal) Control Nasal Hemorrhage, Anterior, Simple (Limited Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Anterior, Complex (Extensive Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Posterior, With Posterior Nasal Packs And/Or Cautery, Any Method; Initial Control Nasal Hemorrhage, Posterior, With Posterior Nasal Packs; Initial Subsequent	\$116.13 \$187.43 \$250.33 \$357.62

Code	Description	Fee
	Irrigation Of Nasal Sinus (Maxillary)	\$175.61
	Irrigation Of Nasal Sinus (Sphenoid)	\$135.82
31020	Incision Of Nasal (Maxillary) Sinus Through The Nose	\$442.65
	Create A Window Into The Nasal (Maxillary) Sinus	\$610.21
	Sinusotomy, Maxillary (Antrotomy) Radical (Caldwell-Luc) With Removal Of Antrochoanal Polyps	\$563.64
	Surgery On Pterygomaxillary Fossa Contents By Transantral Approach Incision Of Nasal (Sphenoid) Sinus	\$762.06
	Sinusotomy, Sphenoid, With Or Without Biopsy With Mucosal Stripping Or Removal Of Polyp(S)	\$493.93 \$663.67
	Incision Of Nasal (Frontal) Sinus	\$456.70
	Sinusotomy Frontal; Transorbital, Unilateral (For Mucocele Or Osteoma, Lynch Type)	\$787.32
	Insertion Of Material To Stop Growth Of Nasal Sinus Lining Without A Bone Flap Done Through An Incision Below The Eyebrow	\$1,034.65
31081	Insertion Of Material To Stop Growth Of Nasal Sinus Lining Without A Bone Flap Done Through An Incision Through The Forehead	\$1,105.92
	Insertion Of Material To Stop Growth Of Nasal Sinus Lining With A Bone Flap Done Through An Incision Below The Eyebrow	\$1,143.70
	Insertion Of Material To Stop Growth Of Nasal Sinus Lining With A Bone Flap Done Through An Incision Through The Forehead	\$1,177.64
	Incision Under The Eyebrow To Drain The Nasal (Frontal) Sinus With Placement Of Bone Graft	\$1,114.33
	Incision Through The Forehead To Drain The Nasal (Frontal) Sinus With Placement Of Bone Graft	\$1,055.15
	Sinusotomy, Unilateral, Three Or More Paranasal Sinuses (Frontal, Maxillary, Ethmoid, Sphenoid)	\$1,065.15
	Ethmoidectomy; Intranasal, Anterior Removal Of Nasal Sinus From Within The Nose Passage	\$603.13 \$758.74
	Removal Of Nasal Sinus From Outside The Nose Passage	\$896.13
	Maxillectomy; Without Orbital Exenteration	\$1,674.97
	Maxillectomy; With Orbital Exenteration (En Bloc)	\$1,860.14
	Nasal Endoscopy, Diagnostic, Unilateral Or Bilateral (Separate Procedure)	\$193.66
	Examination Of Nasal Passage And Sinus Above Teeth (Maxillary Sinus) Using Endoscope	\$262.86
	Examination Of Nasal Passage And Sinus Above Eyes (Sphenoid Sinus) Using Endoscope	\$298.73
	Biopsy Or Removal Of Nasal Polyp Or Tissue Using An Endoscope	\$268.46
	Control Of Bleeding Of Nose Using An Endoscope	\$195.77
	Incision Of Tear Duct Using An Endoscope	\$627.52
	Removal Of Nasal Breathing Passages Using An Endoscope	\$160.19
	Tying Of Sphenopalatine Artery Using An Endoscope	\$402.85
	Destruction Of Nasal Nerve By Heat Using An Endoscope Destruction Of Nasal Nerve By Freezing Using An Endoscope	\$2,205.31
	Complete Examination Of Nose And Sinuses Using An Endoscope	\$2,140.47 \$508.48
	Partial Removal Of Nasal Sinus Using An Endoscope	\$464.68
	Complete Removal Of Nasal Sinus Using An Endoscope	\$326.59
	Incision Of Nasal (Maxillary) Sinus Using An Endoscope	\$181.52
	Complete Examination Of Nose And Sinuses And Removal Of Nasal Sinus Using An Endoscope	\$453.03
31259	Removal Of Tissue From Sphenoid Sinus Using An Endoscope	\$480.02
	Removal Of Nasal Sinus Tissue Using An Endoscope, Maxillary Sinus	\$267.40
	Exploration Of Nasal Sinus Using An Endoscope	\$380.79
	Incision Of Nasal (Sphenoid) Sinus Using An Endoscope	\$203.25
	Removal Of Nasal Sinus Tissue Using An Endoscope, Sphenoid Sinus Repair Of Leak Of Brain And Spinal Fluid From Sinus Behind Bridge Of Nose Using Endoscope	\$236.12
	Repair Of Leak Of Brain And Spinal Fluid From Sinus Behind Eyes Using Endoscope Repair Of Leak Of Brain And Spinal Fluid From Sinus Behind Eyes Using Endoscope	\$1,051.12 \$1,103.34
	Decompression Of Inner Side Or Floor Of Eye Socket Using Endoscope	\$1,026.88
	Decompression Of Inner Side And Floor Of Eye Socket Using Endoscope	\$990.38
	Decompression Of Optic Nerve Using Endoscope	\$1,129.98
	Dilation Of Maxillary Sinus In The Nose Using An Endoscope	\$1,874.80
31296	Dilation Of Frontal Sinus In The Nose Using An Endoscope	\$1,900.61
31297	Dilation Of Sphenoid Sinus In The Nose Using An Endoscope	\$1,674.32
	Dilation Of Sphenoid And Frontal Sinus In The Nose Using An Endoscope	\$3,534.16
	Unlisted Procedure, Accessory Sinuses	Price By Report
	Removal Of Vocal Cord Growth Or Cartilage Attachment	\$1,173.19
	Removal Of Voice Box, Total	\$1,796.74
	Removal Of Voice Box, Muscle, Lymph Nodes, And Glands, Total, With Neck Dissection Laryngectomy; Subtotal Supraglottic, Without Radical Neck Dissection	\$2,342.82
	Removal Of Voice Box And Lymph Nodes In Neck	\$2,025.04 \$2,238.84
	Partial Removal Of Voice Box, Horizontal	\$1,906.59
	Partial Removal Of Voice Box, Honzontal	\$1,812.30
	Partial Removal Of Voice Box, Anterovertical	\$1,787.52
	Partial Removal Of Voice Box, Antero-Latero-Vertical	\$1,955.92
31390	Removal Of Voice Box, Throat, Muscle, Lymph Nodes, And Glands	\$2,591.89
	Removal Of Voice Box And Throat, Muscle, Lymph Nodes, And Glands With Reconstruction Of Defect	\$2,726.18
	Arytenoidectomy Or Arytenoidopexy, External Approach	\$953.91
	Epiglottidectomy	\$775.24
	Intubation, Endotracheal, Emergency Procedure	\$140.83
24500	Tracheotomy Tube Change Prior To Establishment Of Fistula Tract	\$35.29 \$87.36
	Diagnostic Evamination Of Voice Roy Lising An Endocome, With A Mirror	
31505	Diagnostic Examination Of Voice Box Using An Endoscope, With A Mirror Biopsy Of Voice Box Using An Endoscope, Indirect	
31505 31510	Biopsy Of Voice Box Using An Endoscope, Indirect	\$204.29
31505 31510 31511	Biopsy Of Voice Box Using An Endoscope, Indirect Removal Of Foreign Body From Voice Box Using An Endoscope, Indirect	\$204.29 \$200.30
31505 31510 31511 31512	Biopsy Of Voice Box Using An Endoscope, Indirect	\$204.29 \$200.30 \$204.63
31505 31510 31511 31512 31513	Biopsy Of Voice Box Using An Endoscope, Indirect Removal Of Foreign Body From Voice Box Using An Endoscope, Indirect Laryngoscopy, Indirect (Separate Procedure); With Removal Of Lesion	\$204.29 \$200.30
31505 31510 31511 31512 31513 31515	Biopsy Of Voice Box Using An Endoscope, Indirect Removal Of Foreign Body From Voice Box Using An Endoscope, Indirect Laryngoscopy, Indirect (Separate Procedure); With Removal Of Lesion Laryngoscopy, Indirect (Separate Procedure); With Vocal Cord Injection	\$204.29 \$200.30 \$204.63 \$118.73
31505 31510 31511 31512 31513 31515 31520 31525	Biopsy Of Voice Box Using An Endoscope, Indirect Removal Of Foreign Body From Voice Box Using An Endoscope, Indirect Laryngoscopy, Indirect (Separate Procedure); With Removal Of Lesion Laryngoscopy, Indirect (Separate Procedure); With Vocal Cord Injection Laryngoscopy Direct; For Aspiration	\$204.29 \$200.30 \$204.63 \$118.73 \$204.29

Code	Description	Fee
	Laryngoscopy Direct; With Insertion Of Obturator	\$176.47
	Dilation Of The Voice Box Using An Endoscope, Initial	\$144.78
31529	Dilation Of The Voice Box Using An Endoscope, Subsequent	\$162.26
31530	Removal Of Foreign Body From Voice Box Using An Endoscope, Direct	\$200.11
	Laryngoscopy, Direct, Operative, With Foreign Body Removal; With Operating Microscope Or Telescope	\$212.46
	Biopsy Of Voice Box Using An Endoscope, Direct	\$190.13
	Laryngoscopy, Direct, Operative, With Biopsy; With Operating Microscope Or Telescope	\$211.73
	Removal Of Growth Of Tongue And/Or Vocal Cord Stripping Using An Endoscope Removal Of Growth Of Tongue And/Or Vocal Cord Stripping Using An Endoscope With Operating Microscope Or Telescope	\$243.02 \$264.61
	Removal Of Vocal Cord Growths With Local Tissue Flap Using An Endoscope With Operating Microscope Or Telescope	\$363.45
	Removal Of Vocal Cord Growths With Graft Repair Using An Endoscope With Operating Microscope Or Telescope	\$495.85
	Repair Of Narrowed Voice Box With Graft In Patient Younger Than 12 Years Of Age	\$1,493.48
31552	Repair Of Narrowed Voice Box With Graft In Patient Age 12 Years Or Older	\$1,388.35
	Repair Of Narrowed Voice Box With Graft And Placement Of Indwelling Stent In Patient Younger Than 12 Years Of Age	\$1,576.81
	Repair Of Narrowed Voice Box With Graft And Placement Of Indwelling Stent In Patient Age 12 Years Or Older	\$1,577.78
	Laryngoscopy, Direct, Operative, With Arytenoidectomy;	\$282.46
	Laryngoscopy, Direct, Operative, With Arytenoidectomy; With Operating Microscope Or Telescope Laryngoscopy, Direct, With Injection Into Vocal Cord(S), Therapeutic;	\$343.32 \$356.76
	Laryngoscopy, Direct, With Injection Into Vocal Cord(S), Therapeutic; With Operating Microscope Or Telescope	\$250.29
	Destruction Of Abnormality Of One Side Of Voice Box Using A Flexible Endoscope	\$513.94
	Injection Of Drug Into One Side Of Voice Box Using A Flexible Endoscope	\$280.30
31574	Injection Of Substance To Augment Voice Box Using A Flexible Endoscope	\$946.35
	Diagnostic Examination Of Voice Box Using Flexible Endoscope	\$132.53
	Biopsy Of Voice Box Using A Flexible Endoscope	\$197.18
	Removal Of Foreign Body From Voice Box Using A Flexible Endoscope	\$262.86
	Removal Of Growth From Voice Box Using A Flexible Endoscope Examination To Assess Movement Of Vocal Cord Flaps Using An Endoscope	\$292.70
	Repair Of Congenital Vocal Cord Defect	\$191.79 \$1,213.55
	Incision Of Voice Box To Repair Thyroid Cartilage Fracture	\$1,331.46
	Repair Of Split In The Voice Box Cartilage	\$1,130.97
	Laryngeal Reinnervation By Neuromuscular Pedicle	\$881.52
31591	Repair Of One Side Of Voice Box By Moving Vocal Cord To Middle	\$1,032.20
	Excision Of Part Of Windpipe And Cricoid Cartilage	\$1,609.69
	Unlisted Procedure, Larynx Toucher the Procedure (Procedure)	Price By Report
	Tracheostomy, Planned (Separate Procedure); Opening Of Windpipe Through Neck For Insertion Of Breathing Tube, Patient Younger Than 2 Years	\$302.84
	Tracheostomy, Emergency Procedure; Transtracheal	\$398.67 \$317.88
	Tracheostomy, Emergency Procedure; Transtracheal Cricothyroid Membrane	\$325.30
	Tracheostomy, Fenestration Procedure With Skin Flaps	\$845.38
	Construction Of Tracheoesophageal Fistula And Subsequent Insertion Of An Alaryngeal Speech Prosthesis (Eg, Voice Button, Blom-Singer	
	Prosthesis)	\$505.88
	Puncture Of Neck And Windpipe Cartilage For Aspiration And/Or Injection, Accessed Through The Skin	\$88.68
	Revision Of Permanent Opening Of Windpipe For Breathing, Without A Flap Of Tissue Revision Of Permanent Opening Of Windpipe For Breathing, With A Flap Of Tissue	\$375.75
	Tracheoscopy Through Established Tracheostomy Incision	\$669.24 \$181.57
31013	Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; Diagnostic, With Cell Washing, When Performed	ψ101.37
31622	(Separate Procedure)	\$262.61
31623	Bronchoscopy; With Brushing Or Protected Brushings	\$297.47
31624	Bronchoscopy; With Bronchial Alveolar Lavage	\$273.61
31625	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Bronchial Or Endobronchial Biopsy(S), Single Or Multiple Sites	\$278.75
31626	Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Placement Of Fiducial Markers, Single Or Multiple	\$792.58
51020	Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Computer-Assisted, Image-Guided Navigation (List	ψ1 32.30
31627	Separately In Addition To Code For Primary Procedure[S])	\$1,258.91
31628	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Lung Biopsy(S), Single Lobe	\$404.32
31629	No alla Diana a Of Miadaia a Cartilana Aireana Androna Hairea An Fadanana	#007.74
1	Needle Biopsy Of Windpipe Cartilage, Airway, And/Or Lung Using An Endoscope	\$327.71
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31630	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture	\$327.71
	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Tracheal Stent(S) (Includes Tracheal/ Bronchial	\$200.18
	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Tracheal Stent(S) (Includes Tracheal/ Bronchial Dilation As Required)	
31631	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Tracheal Stent(S) (Includes Tracheal/ Bronchial	\$200.18
31631 31632	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Tracheal Stent(S) (Includes Tracheal/Bronchial Dilation As Required) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Lung Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Needle Aspiration Biopsy(S), Each Additional	\$200.18 \$205.07
31631 31632	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Tracheal Stent(S) (Includes Tracheal/ Bronchial Dilation As Required) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Lung Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Needle Aspiration Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure)	\$200.18 \$205.07
31631 31632 31633	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Tracheal Stent(S) (Includes Tracheal/ Bronchial Dilation As Required) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Lung Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Needle Aspiration Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Balloon Occlusion, With Assessment Of Air Leak,	\$200.18 \$205.07 \$67.63 \$83.87
31631 31632 31633 31634	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Tracheal Stent(S) (Includes Tracheal/ Bronchial Dilation As Required) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Lung Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Needle Aspiration Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Balloon Occlusion, With Assessment Of Air Leak, With Administration Of Occlusive Substance (Eg, Fibrin Glue), If Performed	\$200.18 \$205.07 \$67.63 \$83.87 \$1,577.76
31631 31632 31633 31634	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Tracheal Stent(S) (Includes Tracheal/ Bronchial Dilation As Required) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Lung Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Needle Aspiration Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Balloon Occlusion, With Assessment Of Air Leak, With Administration Of Occlusive Substance (Eg, Fibrin Glue), If Performed Bronchoscopy; With Removal Of Foreign Body	\$200.18 \$205.07 \$67.63 \$83.87
31631 31632 31633 31634 31635	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Tracheal Stent(S) (Includes Tracheal/ Bronchial Dilation As Required) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Lung Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Needle Aspiration Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Balloon Occlusion, With Assessment Of Air Leak, With Administration Of Occlusive Substance (Eg, Fibrin Glue), If Performed	\$200.18 \$205.07 \$67.63 \$83.87 \$1,577.76
31631 31632 31633 31634 31635	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Tracheal Stent(S) (Includes Tracheal/ Bronchial Dilation As Required) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Lung Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Needle Aspiration Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Balloon Occlusion, With Assessment Of Air Leak, With Administration Of Occlusive Substance (Eg, Fibrin Glue), If Performed Bronchoscopy; With Removal Of Foreign Body Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Bronchial Stent(S) (Includes Tracheal/ Bronchial	\$200.18 \$205.07 \$67.63 \$83.87 \$1,577.76 \$311.46
31631 31632 31633 31634 31635 31636	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Tracheal Stent(S) (Includes Tracheal/ Bronchial Dilation As Required) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Lung Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Needle Aspiration Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Balloon Occlusion, With Assessment Of Air Leak, With Administration Of Occlusive Substance (Eg, Fibrin Glue), If Performed Bronchoscopy, With Removal Of Foreign Body Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Bronchial Stent(S) (Includes Tracheal/ Bronchial Dilation As Required), Initial Bronchus Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; Each Additional Major Bronchus Stented (List Separately In Addition To Code For Primary Procedure)	\$200.18 \$205.07 \$67.63 \$83.87 \$1,577.76 \$311.46
31631 31632 31633 31634 31635 31636	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Tracheal Stent(S) (Includes Tracheal/ Bronchial Dilation As Required) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Lung Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Needle Aspiration Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Balloon Occlusion, With Assessment Of Air Leak, With Administration Of Occlusive Substance (Eg, Fibrin Glue), If Performed Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Bronchial Stent(S) (Includes Tracheal/ Bronchial Dilation As Required), Initial Bronchus Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; Each Additional Major Bronchus Stented (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Revision Of Tracheal Or Bronchial Stent Inserted At Previous	\$200.18 \$205.07 \$67.63 \$83.87 \$1,577.76 \$311.46 \$198.48 \$70.59
31631 31632 31633 31634 31635 31636 31637	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Tracheal Stent(S) (Includes Tracheal/ Bronchial Dilation As Required) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Lung Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Needle Aspiration Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Balloon Occlusion, With Assessment Of Air Leak, With Administration Of Occlusive Substance (Eg, Fibrin Glue), If Performed Bronchoscopy; With Removal Of Foreign Body Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Bronchial Stent(S) (Includes Tracheal/ Bronchial Dilation As Required), Initial Bronchus Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; Each Additional Major Bronchus Stented (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Revision Of Tracheal Or Bronchial Stent Inserted At Previous Session (Includes Tracheal/Bronchial Dilation As Required)	\$200.18 \$205.07 \$67.63 \$83.87 \$1,577.76 \$311.46 \$198.48 \$70.59
31631 31632 31633 31634 31635 31636 31637	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Tracheal Stent(S) (Includes Tracheal/ Bronchial Dilation As Required) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Lung Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Needle Aspiration Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Balloon Occlusion, With Assessment Of Air Leak, With Administration Of Occlusive Substance (Eg, Fibrin Glue), If Performed Bronchoscopy; With Removal Of Foreign Body Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Bronchial Stent(S) (Includes Tracheal/ Bronchial Dilation As Required), Initial Bronchus Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; Each Additional Major Bronchus Stented (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Revision Of Tracheal Or Bronchial Stent Inserted At Previous Session (Includes Tracheal/Bronchial Dilation As Required) Bronchoscopy; With Excision Of Tumor	\$200.18 \$205.07 \$67.63 \$83.87 \$1,577.76 \$311.46 \$198.48 \$70.59
31631 31632 31633 31634 31635 31637 31638 31640	Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Tracheal Stent(S) (Includes Tracheal/ Bronchial Dilation As Required) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Lung Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Needle Aspiration Biopsy(S), Each Additional Lobe (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Balloon Occlusion, With Assessment Of Air Leak, With Administration Of Occlusive Substance (Eg, Fibrin Glue), If Performed Bronchoscopy; With Removal Of Foreign Body Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Bronchial Stent(S) (Includes Tracheal/ Bronchial Dilation As Required), Initial Bronchus Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; Each Additional Major Bronchus Stented (List Separately In Addition To Code For Primary Procedure) Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Revision Of Tracheal Or Bronchial Stent Inserted At Previous Session (Includes Tracheal/Bronchial Dilation As Required)	\$200.18 \$205.07 \$67.63 \$83.87 \$1,577.76 \$311.46 \$198.48 \$70.59

Code Description Propheneous Birid Or Flevible Including Flyeroscopic Cuidosco When Performed With Placement Of Catheter(S) For Intracquitory	Fee
Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Placement Of Catheter(S) For Intracavitary 31643 Radioelement Application	\$161.25
31645 Aspiration Of Lung Secretions From Lung Airways Using An Endoscope, Initial	\$261.77
31646 Aspiration Of Lung Secretions From Lung Airways Using An Endoscope, Subsequent	\$144.50
31647 Assessment Of Air Leak, Airway Sizing, And Insertion Of Bronchial Valves In Lung Airways Using An Endoscope, Initial	\$188.86
31648 Removal Of Bronchial Valves In Lung Airways Using An Endoscope, Initial	\$180.69
31649 Removal Of Bronchial Valves In Lung Airways Using An Endoscope, Subsequent	\$61.75
31651 Assessment Of Air Leak, Airway Sizing, And Insertion Of Bronchial Valves In Lung Airways Using An Endoscope, Additional Lobe	\$69.60
31652 Examination Of Lung Airways Using An Endoscope With Imaging Guidance And Ultrasound, 1 Or 2 Lymph Nodes Involved	\$999.11
31653 Examination Of Lung Airways Using An Endoscope With Imaging Guidance And Ultrasound, 3 Or More Lymph Nodes Involved	\$1,061.17
31654 Examination Of Lung Airways Using An Endoscope With Imaging Guidance And Ultrasound	\$118.27
31660 Thermal Repair Of Lung Airways Using An Endoscope, 1 Lobe	\$180.45
31661 Thermal Repair Of Lung Airways Using An Endoscope, 2 Or More Lobes	\$189.82
31717 Catheterization With Bronchial Brush Biopsy	\$285.79
31720 Catheter Aspiration (Separate Procedure); Nasotracheal 31725 Catheter Aspiration (Separate Procedure); Tracheobronchial With Fiberscope, Bedside	\$54.77
31725 Carrieter Aspiration (Separate Procedure), Hacheodronichia With Fiberscope, Bedside 31730 Insertion Into Windpipe Of Needle Wire, Dilator, Stent, Or Tube For Oxygen Delivery	\$73.30 \$1,092.21
31750 Tracheoplasty; Cervical	\$1,199.78
31750 Tracheoplasty, Cervical 31755 Tracheoplasty, Tracheopharyngeal Fistulization, Each Stage	\$1,645.09
31760 Tracheoplasty, Intrathoracic	\$1,204.42
31766 Carinal Reconstruction	\$1,545.62
31770 Bronchoplasty; Graft Repair	\$1,343.02
31775 Bronchoplasty, Graft Repail 31775 Bronchoplasty; Excision Stenosis And Anastomosis	\$1,137.11
31775 Brothchopiasty, Excision Steriosis And Ariastomosis 31780 Removal Of Narrowed Area Of Windpipe In Neck With Suture Repair	\$1,069.48
31780 Removal Of Narrowed Area Of Windpipe In Neck And Chest With Suture Repair	\$1,313.61
31785 Excision Of Tracheal Tumor Or Carcinoma; Cervical	\$976.74
31786 Removal Of Windpipe Cartilage Growth, Open Chest Procedure	\$1,257.19
31800 Suture Of Injury To Windpipe In Neck	\$671.15
31805 Suture Of Injury To Windpipe In Chest	\$720.78
31820 Surgical Closure Tracheostomy Or Fistula; Without Plastic Repair	\$421.21
31825 Surgical Closure Tracheostomy Or Fistula; With Plastic Repair	\$575.94
31830 Revision Of Tracheostomy Scar	\$470.83
31899 Unlisted Procedure, Trachea, Bronchi	Price By Report
32035 Thoracostomy; With Rib Resection For Empyema	\$653.07
32036 Thoracostomy; With Open Flap Drainage For Empyema	\$703.00
32096 Thoracotomy, With Diagnostic Biopsy(les) Of Lung Infiltrate(S) (Eg, Wedge, Incisional), Unilateral	\$700.20
32097 Thoracotomy, With Diagnostic Biopsy(les) Of Lung Nodule(S) Or Mass(Es) (Eg, Wedge, Incisional), Unilateral	\$701.62
32098 Thoracotomy, With Biopsy(les) Of Pleura	\$665.54
32100 Thoracotomy; With Exploration	\$789.38
32110 Thoracotomy; With Control Of Traumatic Hemorrhage And/Or Repair Of Lung Tear	\$993.31
32120 Thoracotomy; For Postoperative Complications	\$816.51
32124 Thoracotomy; With Open Intrapleural Pneumonolysis	\$813.96
32140 Thoracotomy; With Cyst(S) Removal, Includes Pleural Procedure When Performed	\$868.60
32141 Thoracotomy; With Resection-Plication Of Bullae, Includes Any Pleural Procedure When Performed	\$1,324.41
32150 Thoracotomy; With Removal Of Intrapleural Foreign Body Or Fibrin Deposit	\$976.91
32151 Thoracotomy; With Removal Of Intrapulmonary Foreign Body	\$978.96
32160 Thoracotomy; With Cardiac Massage	\$779.85
32200 Drainage Of Infected Lung Material Or Cyst, Open Procedure	\$1,002.04
32215 Pleural Scarification For Repeat Pneumothorax	\$703.51
32220 Decortication, Pulmonary, (Separate Procedure); Total	\$1,434.00
32225 Decortication, Pulmonary, (Separate Procedure); Partial 32310 Pleurectomy, Parietal (Separate Procedure)	\$973.26 \$808.50
32310 Predirectionly, Parietal (Separate Procedure) 32320 Decortication And Parietal Pleurectomy	
32400 Needle Biopsy Of Lining Of Lung, Accessed Through The Skin	\$1,406.07 \$125.45
32400 Needle Biopsy Of Lining Of Conter Cavity Of Chest (Mediastinum), Accessed Through Skin	\$125.45
32440 Removal Of Lung, Pneumonectomy;	\$1,372.38
Removal Of Lung, Pneumonectomy, With Resection Of Segment Of Trachea Followed By Broncho-Tracheal Anastomosis (Sleeve	φ1,312.30
32442 Pneumonectomy)	\$2,642.83
32445 Removal Of Lung, Pneumonectomy; Extrapleural	\$3,062.19
32480 Removal Of Lung, Other Than Pneumonectomy; Single Lobe (Lobectomy)	\$1,458.70
32482 Removal Of Lung, Other Than Pneumonectomy; 2 Lobes (Bilobectomy)	\$1,384.94
32484 Removal Of Lung, Other Than Pneumonectomy; Single Segment (Segmentectomy)	\$1,389.59
Removal Of Lung, Other Than Pneumonectomy; With Circumferential Resection Of Segment Of Bronchus Followed By Broncho-Bronchial	÷ 1,000.00
32486 Anastomosis (Sleeve Lobectomy)	\$2,028.53
Removal Of Lung, Other Than Pneumonectomy; With All Remaining Lung Following Previous Removal Of A Portion Of Lung (Completion	
32488 Pneumonectomy)	\$2,076.94
32491 Volume Reduction, Sternal Split Or Transthoracic Approach, Includes Any Pleural Procedure, When Performed	\$1,288.00
Resection And Repair Of Portion Of Bronchus (Bronchoplasty) When Performed At Time Of Lobectomy Or Segmentectomy (List Separately In	
32501 Addition To Code For Primary Procedure)	\$208.71
Resection Of Apical Lung Tumor (Eg, Pancoast Tumor), Including Chest Wall Resection, Rib(S) Resection(S), Neurovascular Dissection, When	
32503 Performed; Without Chest Wall Reconstruction(S)	\$1,563.07
Resection Of Apical Lung Tumor (Eg, Pancoast Tumor), Including Chest Wall Resection, Rib(S) Resection(S), Neurovascular Dissection, Whe	
32504 Performed; With Chest Wall Reconstruction	\$1,777.89
32505 Thoracotomy; With Therapeutic Wedge Resection (Eg, Mass, Nodule), Initial	\$907.48
32506 Opening In Chest With Partial Removal Of Lung Tissue, Additional Resection	\$149.70
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Thoracotomy; With Diagnostic Wedge Resection Followed By Anatomic Lung Resection (List Separately In Addition To Code For Primary 32507 Procedure)	\$134.73

Code Description	Foo
Code Description 32540 Extrapleural Enucleation Of Empyema (Empyemectomy);	Fee \$1,507.22
32550 Insertion Of Indwelling Tunneled Pleural Catheter With Cuff	\$812.07
32551 Removal Of Fluid From Between Lung And Chest Cavity, Open Procedure	\$154.47
32552 Removal Of Indwelling Tunneled Pleural Catheter With Cuff	\$195.07
32553 Insertion Of Devices In Chest Cavity For Radiation Therapy Guidance, Accessed Through The Skin	\$502.79
32554 Thoracentesis, Needle Or Catheter, Aspiration Of The Pleural Space; Without Imaging Guidance	\$257.24
32555 Thoracentesis, Needle Or Catheter, Aspiration Of The Pleural Space; With Imaging Guidance	\$346.27
32556 Removal Of Fluid From Chest Cavity With Insertion Of Indwelling Catheter, Accessed Through The Skin	\$705.79
32557 Removal Of Fluid From Chest Cavity With Insertion Of Indwelling Catheter And Imaging Guidance, Accessed Through The Skin	\$738.50
32560 Instillation, Via Chest Tube/Catheter, Agent For Pleurodesis (Eg, Talc For Recurrent Or Persistent Pneumothorax)	\$273.63
32601 Diagnostic Examination Of Lungs, Heart Sac, Mid-Chest Cavity, Or Lung Lining Using An Endoscope	\$297.51
32604 Thoracoscopy, Diagnostic (Separate Procedure); Pericardial Sac, With Biopsy	\$414.62
32606 Thoracoscopy, Diagnostic (Separate Procedure); Mediastinal Space, With Biopsy	\$400.30
32607 Thoracoscopy; With Diagnostic Biopsy(les) Of Lung Infiltrate(S) (Eg, Wedge, Incisional), Unilateral	\$267.44
32608 Thoracoscopy; With Diagnostic Biopsy(les) Of Lung Nodule(S) Or Mass(Es) (Eg, Wedge, Incisional), Unilateral	\$364.65
32609 Thoracoscopy; With Biopsy(les) Of Pleura	\$224.77
32650 Thoracoscopy, Surgical; With Pleurodesis (Eg, Mechanical Or Chemical)	\$655.05
32651 Thoracoscopy, Surgical; With Partial Pulmonary Decortication	\$1,064.82
32652 Thoracoscopy, Surgical; With Total Pulmonary Decortication, Including Intrapleural Pneumonolysis	\$1,449.75
32653 Thoracoscopy, Surgical; With Removal Of Intrapleural Foreign Body Or Fibrin Deposit	\$976.91
32654 Thoracoscopy, Surgical; With Control Of Traumatic Hemorrhage	\$993.31
32655 Thoracoscopy, Surgical; With Resection-Plication Of Bullae, Includes Any Pleural Procedure When Performed	\$837.93
32656 Thoracoscopy, Surgical; With Parietal Pleurectomy	\$706.92
32658 Thoracoscopy, Surgical; With Removal Of Clot Or Foreign Body From Pericardial Sac	\$698.55
32659 Thoracoscopy, Surgical; With Creation Of Pericardial Window Or Partial Resection Of Pericardial Sac For Drainage	\$715.67
32661 Thoracoscopy, Surgical; With Excision Of Pericardial Cyst, Tumor, Or Mass	\$701.15
32662 Thoracoscopy, Surgical; With Excision Of Mediastinal Cyst, Tumor, Or Mass	\$870.45
32663 Thoracoscopy, Surgical; With Lobectomy (Single Lobe)	\$1,218.83
32664 Thoracoscopy, Surgical; With Thoracic Sympathectomy	\$743.55
32665 Thoracoscopy, Surgical; With Esophagomyotomy (Heller Type)	\$1,073.95
32666 Thoracoscopy, Surgical; With Therapeutic Wedge Resection (Eg, Mass, Nodule), Initial Unilateral	\$848.12
32667 Partial Removal Of Tissue Of One Lung Using An Endoscope, Additional Resection	\$135.06
32668 Biopsy Of Wedge Of Lung Tissue Followed By Partial Removal Of Lung	\$135.18
32669 Thoracoscopy, Surgical; With Removal Of A Single Lung Segment (Segmentectomy) 32670 Thoracoscopy, Surgical; With Removal Of Two Lobes (Bilobectomy)	\$1,170.10
32671 Thoracoscopy, Surgical; With Removal Of Lung (Pneumonectomy)	\$1,396.06
Thoracoscopy, Surgical, With Removal of Eding (Friedmonectomy) Thoracoscopy, Surgical; With Resection-Plication For Emphysematous Lung (Bullous Or Non-Bullous) For Lung Volume Reduction (Lvrs),	\$1,539.32
32672 Unilateral Includes Any Pleural Procedure, When Performed	\$1,322.20
32673 Thoracoscopy, Surgical; With Resection Of Thymus, Unilateral Or Bilateral	\$1,060.51
oze o contraction of the contrac	\$1,000.01
32674 Thoracoscopy, Surgical; With Mediastinal And Regional Lymphadenectomy (List Separately In Addition To Code For Primary Procedure)	\$205.66
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32701 Thoracic Target(S) Delineation For Stereotactic Body Radiation Therapy (Srs/Sbrt), (Photon Or Particle Beam), Entire Course Of Treatment	\$186.46
32800 Repair Lung Hernia Through Chest Wall	\$829.82
32810 Closure Of Chest Wall Following Open Flap Drainage For Empyema (Clagett Type Procedure)	\$791.47
32815 Closure Of Abnormal Drainage Tract From Chest Cavity To Lung Airway, Open Procedure	\$2,438.57
32820 Major Reconstruction, Chest Wall (Post-Traumatic)	\$1,166.82
32850 Donor Pneumonectomy (Including Cold Preservation), From Cadaver Donor	Price By Report
32851 Lung Transplant, Single; Without Cardiopulmonary Bypass	\$2,837.28
32852 Lung Transplant, Single; With Cardiopulmonary Bypass	\$3,074.38
32853 Lung Transplant, Double (Bilateral Sequential Or En Bloc); Without Cardiopulmonary Bypass	\$3,962.57
32854 Lung Transplant, Double (Bilateral Sequential Or En Bloc); With Cardiopulmonary Bypass	\$3,648.63
Backbench Standard Preparation Of Cadaver Donor Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding	D: 5 -
32855 Soft Tissues To Prepare Pulmonary Venous/Atrial Cuff, Pulmonary Artery, And Bronchus; Unilateral	Price By Report
Backbench Standard Preparation Of Cadaver Donor Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding	Drice Dr. Den
32856 Soft Tissues To Prepare Pulmonary Venous/Atrial Cuff, Pulmonary Artery, And Bronchus; Bilateral	Price By Report
32900 Resection Of Ribs, Extrapleural, All Stages 32905 Thoracoplasty, Schede Type Or Extrapleural (All Stages);	\$1,243.11 \$1,164.29
32906 Thoracoplasty, Schede Type Or Extrapleural (All Stages); 32906 Thoracoplasty, Schede Type Or Extrapleural (All Stages); With Closure Of Bronchopleural Fistula	\$1,164.29
32906 Inforacopiasty, Schede Type Of Extrapledial (All Stages), With Closure Of Brothchopiedial Fistula 32940 Pneumonolysis, Extraperiosteal, Including Filling Or Packing Procedures	\$1,433.09
32960 Pneumothorax, Therapeutic, Intrapleural Injection Of Air	\$1,077.09
32994 Destruction Of Growths In One Lung, Accessed Through The Skin With Imaging Using Extreme Cold To Destroy Tissues	\$5,003.05
32997 Total Lung Lavage (Unilateral)	\$313.44
32998 Destruction Of Growths In One Lung, Accessed Through The Skin Using Radiofrequency To Destroy Tissues	\$3,153.49
32999 Unlisted Procedure, Lungs And Pleura	Price By Report
33016 Drainage Of Heart Sac	\$232.53
Drainage Of Heart Sac With Insertion Of Catheter Accessed Through Skin, Using Fluoroscopy And/Or Ultrasound Guidance Imaging Guidance,	7 . 33
33017 In Patient 6 Years Or Older	\$214.97
Drainage Of Heart Sac With Insertion Of Catheter Accessed Through Skin, Using Fluoroscopy And/Or Ultrasound Guidance Imaging Guidance,	
33018 In Patient 5 Years Or Older Or Any Age With Congenital Heart Defect	\$251.83
33019 Drainage Of Heart Sac With Insertion Of Catheter Accessed Through Skin, Using Imaging Guidance, Using Ct Imaging Guidance	\$193.55
33020 Pericardiotomy For Removal Of Clot Or Foreign Body (Primary Procedure)	\$725.12
33025 Creation Of Pericardial Window Or Partial Resection For Drainage	\$748.61
33030 Pericardiectomy, Subtotal Or Complete Without Cardiopulmonary Bypass	\$1,739.78
33031 Pericardiectomy, Subtotal Or Complete With Cardiopulmonary Bypass	\$2,147.34
33050 Resection Of Pericardial Cyst Or Tumor	\$881.72
33120 Excision Of Intracardiac Tumor, Resection With Cardiopulmonary Bypass	\$1,814.04

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	Resection Of External Cardiac Tumor	\$1,192.70
33140	Transmyocardial Laser Revascularization, By Thoracotomy (Separate Procedure)	\$1,353.70
33141	Transmyocardial Laser Revascularization, By Thoracotomy; Performed At The Time Of Other Open Cardiac Procedure(S) (List Separately In Addition To Code For Primary Procedure)	\$113.42
	Insertion Of Electrodes To Outer Layer Of Heart, Open Procedure	\$750.08
	Insertion Of Electrodes to Gutor Eayer of Fredrit, Open Frederical State (Eg., Thoracoscopy, Pericardioscopy)	\$706.13
	Insertion Of New Or Replacement Of Permanent Pacemaker With Transvenous Electrode(S); Atrial	\$406.47
	Insertion Of New Or Replacement Of Permanent Pacemaker With Transvenous Electrode(S); Ventricular	\$472.17
	Insertion Of New Or Replacement Of Permanent Pacemaker With Transvenous Electrode(S); Atrial And Ventricular	\$511.99
	Placement Of Temporary Pacemaker Leads, Single Chamber	\$157.77
	Placement Of Temporary Pacemaker Leads, Dual Chamber Insertion Of Pacemaker Pulse Generator Only; With Existing Single Lead	\$148.55 \$319.85
	Insertion Of Pacemaker Pulse Generator Only; With Existing Dual Leads	\$333.81
	Upgrade Of Implanted Pacemaker System, Conversion Of Single Chamber System To Dual Chamber System (Includes Removal Of Previously	*
	Placed Pulse Generator, Testing Of Existing Lead, Insertion Of New Lead, Insertion Of New Pulse Generator)	\$427.32
	Repositioning Of Implanted Pacemaker Or Defibrillator Device	\$306.63
	Insertion Of Electrode For Permanent Pacemaker Or Pacing Defibrillator Device Insertion Of Electrodes For Permanent Pacemaker Or Pacing Defibrillator Device	\$333.17
	Repair Of Electrode For Permanent Pacemaker Or Pacing Denominator Device	\$330.11 \$348.99
	Repair Of 2 Electrodes For Permanent Pacemaker Or Defibrillator Device	\$336.15
	Insertion Of Pacemaker Pulse Generator Only; With Existing Multiple Leads	\$322.80
	Relocation Of Pacemaker Generator Skin Pocket	\$343.08
	Relocation Of Defibrillator Device Skin Pocket	\$366.59
	Insertion Of Left Heart Electrode With Attachment To Pacemaker Or Pacing Defibrillator Device	\$451.90
33225	Insertion Of Left Heart Electrode For Pacing Defibrillator Device	\$454.68
22226	Repositioning Of Previously Implanted Cardiac Venous System (Left Ventricular) Electrode (Including Removal, Insertion And/Or Replacement Of Existing Generator)	\$432.58
	Removal Of Permanent Pacemaker Pulse Generator With Replacement Of Pacemaker Pulse Generator; Single Lead System	\$303.37
	Removal Of Permanent Pacemaker Pulse Generator With Replacement Of Pacemaker Pulse Generator; Dual Lead System	\$352.25
	Removal Of Permanent Pacemaker Pulse Generator With Replacement Of Pacemaker Pulse Generator; Multiple Lead System	\$335.25
33230	Insertion Of Pacing Defibrillator Pulse Generator With Existing Dual Leads	\$342.80
	Insertion Of Pacing Defibrillator Pulse Generator With Existing Multiple Leads	\$356.34
	Removal Of Permanent Pacemaker Pulse Generator Only	\$234.49
	Removal Of Transvenous Pacemaker Electrode(S); Single Lead System, Atrial Or Ventricular	\$432.57
	Removal Of Transvenous Pacemaker Electrode(S); Dual Lead System Removal Of Permanent Right Heart Electrodes And Pacemaker, Single Lead System	\$568.85 \$691.79
	Removal Of Permanent Right Heart Electrodes And Pacemaker, Dual Lead System	\$741.18
	Removal Of Permanent Transvenous Electrode(S) By Thoracotomy	\$836.52
33240	Insertion Of Pacing Defibrillator Pulse Generator With Existing Single Lead	\$326.45
	Removal Of Defibrillator Pulse Generator	\$208.47
	Removal Of Defibrillator Electrodes Through Incision Of Chest	\$1,203.22
	Removal Of Defibrillator Electrodes Through Vein	\$740.44
33249	Insertion Or Replacement Of Single Or Dual Chamber Pacing Defibrillator Leads Operative Ablation Of Supraventricular Arrhythmogenic Focus Or Pathway (Eg, Wolff-Parkinson-White, Atrioventricular Node Re-Entry),	\$904.07
33250	Tract(S) And/Or Focus (Foci); Without Cardiopulmonary Bypass	\$1,269.62
	Operative Ablation Of Supraventricular Arrhythmogenic Focus Or Pathway (Eg, Wolff-Parkinson-White, A-V Node Re-Entry), Tract(S) And/Or	* ,
	Focus (Foci) With Cardiopulmonary Bypass	\$1,416.15
	Operative Tissue Ablation And Reconstruction Of Atria, Limited (Eg, Modified Maze Procedure)	\$1,189.40
	Operative Tissue Ablation And Reconstruction Of Atria, Extensive (Eg, Maze Procedure); Without Cardiopulmonary Bypass	\$1,417.00
	Partial Destruction And Reconstruction Of Upper Heart Chamber, Extensive, On Heart-Lung Machine Destruction And Reconstruction Of Right Upper Heart, Limited	\$1,676.72 \$567.72
	Destruction And Reconstruction Of Right Upper Heart, Extensive	\$569.74
	Operative Tissue Ablation And Reconstruction Of Atria. Performed At The Time Of Other Cardiac Procedure(S), Extensive (Eq. Maze	Ψ000.74
	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)	\$742.73
33261	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass	\$1,403.58
33261 33262	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)	\$1,403.58 \$371.05
33261 33262 33263	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)	\$1,403.58 \$371.05 \$385.38
33261 33262 33263 33264	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads) Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads)	\$1,403.58 \$371.05 \$385.38 \$361.04
33261 33262 33263 33264 33265	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)	\$1,403.58 \$371.05 \$385.38 \$361.04 \$1,288.00
33261 33262 33263 33264 33265 33266	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads) Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads) Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited	\$1,403.58 \$371.05 \$385.38 \$361.04
33261 33262 33263 33264 33265 33266 33267 33268	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads) Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads) Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive Exclusion Of Appendage Of Left Upper Chamber Of Heart Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest	\$1,403.58 \$371.05 \$385.38 \$361.04 \$1,288.00 \$1,601.33
33261 33262 33263 33264 33265 33266 33267 33268 33269	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads) Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads) Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive Exclusion Of Appendage Of Left Upper Chamber Of Heart Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope	\$1,403.58 \$371.05 \$385.38 \$361.04 \$1,288.00 \$1,601.33 \$853.20 \$105.64 \$676.13
33261 33262 33263 33264 33265 33266 33267 33268 33269 33270	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads) Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads) Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive Exclusion Of Appendage Of Left Upper Chamber Of Heart Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope Insertion Or Replacement Of Defibrillator With Electrode	\$1,403.58 \$371.05 \$385.38 \$361.04 \$1,288.00 \$1,601.33 \$853.20 \$105.64 \$676.13
33261 33262 33263 33264 33265 33266 33267 33268 33269 33270 33271	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads) Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads) Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive Exclusion Of Appendage Of Left Upper Chamber Of Heart Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest Exclusion Of Replacement Of Defibrillator With Electrode Insertion Of Defibrillator Electrode	\$1,403.58 \$371.05 \$385.38 \$361.04 \$1,288.00 \$1,601.33 \$853.20 \$105.64 \$676.13 \$556.74
33261 33262 33263 33264 33265 33266 33267 33268 33269 33270 33271 33272	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads) Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads) Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive Exclusion Of Appendage Of Left Upper Chamber Of Heart Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope Insertion Or Replacement Of Defibrillator With Electrode Removal Of Defibrillator Electrode	\$1,403.58 \$371.05 \$385.38 \$361.04 \$1,288.00 \$1,601.33 \$853.20 \$105.64 \$676.13 \$556.74 \$400.19
33261 33262 33263 33264 33265 33266 33267 33268 33269 33270 33271 33272	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads) Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads) Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive Exclusion Of Appendage Of Left Upper Chamber Of Heart Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest Exclusion Of Replacement Of Defibrillator With Electrode Insertion Of Defibrillator Electrode	\$1,403.58 \$371.05 \$385.38 \$361.04 \$1,288.00 \$1,601.33 \$853.20 \$105.64 \$676.13 \$556.74
33261 33262 33263 33264 33265 33266 33267 33268 33270 33271 33272 33273	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads) Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads) Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive Exclusion Of Appendage Of Left Upper Chamber Of Heart Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope Insertion Or Replacement Of Defibrillator With Electrode Removal Of Defibrillator Electrode	\$1,403.58 \$371.05 \$385.38 \$361.04 \$1,288.00 \$1,601.33 \$853.20 \$105.64 \$676.13 \$556.74 \$400.19
33261 33262 33263 33264 33265 33266 33267 33268 33279 33271 33272 33273	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads) Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads) Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive Exclusion Of Appendage Of Left Upper Chamber Of Heart Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope Insertion Or Replacement Of Defibrillator With Electrode Insertion Of Defibrillator Electrode Removal Of Defibrillator Electrode Repositioning Of Previously Implanted Defibrillator Electrode	\$1,403.58 \$371.05 \$385.38 \$361.04 \$1,288.00 \$1,601.33 \$853.20 \$105.64 \$676.13 \$556.74 \$400.19 \$309.82 \$353.65
33261 33262 33263 33264 33265 33266 33266 33269 33270 33271 33272 33273 33274 33275 33285	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads) Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads) Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive Exclusion Of Appendage Of Left Upper Chamber Of Heart Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope Insertion Or Replacement Of Defibrillator With Electrode Removal Of Defibrillator Electrode Removal Of Defibrillator Electrode Repositioning Of Previously Implanted Defibrillator Electrode Insertion Or Replacement Of Permanent Leadless Pacemaker Into Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance Removal Of Permanent Leadless Pacemaker From Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance Insertion Of Heart Rhythm Monitor Under Skin	\$1,403.58 \$371.05 \$385.38 \$361.04 \$1,288.00 \$1,601.33 \$853.20 \$105.64 \$676.13 \$556.74 \$400.19 \$309.82 \$353.65
33261 33262 33263 33264 33265 33266 33266 33270 33271 33272 33273 33274 33275 33285 33286	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads) Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads) Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive Exclusion Of Appendage Of Left Upper Chamber Of Heart Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope Insertion Or Replacement Of Defibrillator With Electrode Removal Of Defibrillator Electrode Repositioning Of Previously Implanted Defibrillator Electrode Insertion Or Replacement Of Permanent Leadless Pacemaker Into Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance Removal Of Permanent Leadless Pacemaker From Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance Insertion Of Heart Rhythm Monitor Under Skin Removal Of Heart Rhythm Monitor From Under Skin	\$1,403.58 \$371.05 \$385.38 \$361.04 \$1,288.00 \$1,601.33 \$853.20 \$105.64 \$676.13 \$556.74 \$400.19 \$309.82 \$353.65 \$475.45 \$442.71 \$3,283.10
33261 33262 33263 33264 33265 33266 33269 33270 33271 33272 33273 33274 33275 33285 33286 33289	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads) Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads) Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive Exclusion Of Appendage Of Left Upper Chamber Of Heart Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope Insertion Of Replacement Of Defibrillator With Electrode Removal Of Defibrillator Electrode Repositioning Of Previously Implanted Defibrillator Electrode Insertion Or Replacement Of Permanent Leadless Pacemaker Into Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance Removal Of Permanent Leadless Pacemaker From Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance Insertion Of Heart Rhythm Monitor Under Skin Removal Of Heart Rhythm Monitor From Under Skin Insertion Of Wireless Pressure Sensor Into Lung Artery Via Catheter	\$1,403.58 \$371.05 \$385.38 \$361.04 \$1,288.00 \$1,601.33 \$853.20 \$105.64 \$676.13 \$556.74 \$400.19 \$309.82 \$353.65 \$475.45 \$442.71 \$3,283.10 \$136.92 \$324.44
33261 33262 33263 33264 33266 33266 33269 33270 33271 33273 33273 33273 33274 33286 33289 33300	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads) Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads) Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive Exclusion Of Appendage Of Left Upper Chamber Of Heart Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope Insertion Or Replacement Of Defibrillator With Electrode Insertion Of Defibrillator Electrode Removal Of Defibrillator Electrode Repositioning Of Previously Implanted Defibrillator Electrode Insertion Or Replacement Of Permanent Leadless Pacemaker Into Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance Removal Of Permanent Leadless Pacemaker From Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance Insertion Of Heart Rhythm Monitor Under Skin Removal Of Heart Rhythm Monitor Under Skin Insertion Of Wireless Pressure Sensor Into Lung Artery Via Catheter Repair Of Cardiac Wound; Without Bypass	\$1,403.58 \$371.05 \$385.38 \$361.04 \$1,288.00 \$1,601.33 \$853.20 \$105.64 \$676.13 \$556.74 \$400.19 \$309.82 \$353.65 \$475.45 \$442.71 \$3,283.10 \$136.92 \$324.44
33261 33262 33263 33264 33266 33266 33269 33270 33271 33272 33273 33274 33275 33285 33289 33300 33305	Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure) Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead) Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads) Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads) Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive Exclusion Of Appendage Of Left Upper Chamber Of Heart Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope Insertion Of Replacement Of Defibrillator With Electrode Removal Of Defibrillator Electrode Repositioning Of Previously Implanted Defibrillator Electrode Insertion Or Replacement Of Permanent Leadless Pacemaker Into Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance Removal Of Permanent Leadless Pacemaker From Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance Insertion Of Heart Rhythm Monitor Under Skin Removal Of Heart Rhythm Monitor From Under Skin Insertion Of Wireless Pressure Sensor Into Lung Artery Via Catheter	\$1,403.58 \$371.05 \$385.38 \$361.04 \$1,288.00 \$1,601.33 \$853.20 \$105.64 \$676.13 \$556.74 \$400.19 \$309.82 \$353.65 \$475.45 \$442.71 \$3,283.10 \$136.92 \$324.44

	Description	Fee
	Suture Repair Of Aorta Or Great Vessels; Without Shunt Or Cardiopulmonary Bypass	\$923.14
	Suture Repair Of Aorta Or Great Vessels; With Shunt Bypass	\$1,038.75
33322	Suture Repair Of Aorta Or Great Vessels; With Cardiopulmonary Bypass	\$1,213.43
33330	Insertion Of Graft, Aorta Or Great Vessels; Without Shunt, Or Cardiopulmonary Bypass	\$1,242.53
	Insertion Of Graft; With Cardiopulmonary Bypass	\$1,809.92
	Repair Of Left Upper Heart	\$687.45
	Replacement Of Aortic Valve With Prosthetic Valve, Accessed Through The Skin	\$1,165.85
	Replacement Of Aortic Valve With Prosthetic Valve, Open Procedure Through Femoral Artery	\$1,143.03
	Replacement Of Aortic Valve With Prosthetic Valve, Open Procedure Through Axillary Artery Replacement Of Aortic Valve With Prosthetic Valve, Open Procedure Through Iliac Artery	\$1,184.77
	Replacement Of Aortic Valve With Prosthetic Valve Through Catheter By Approach Through Aorta	\$1,181.11 \$1,237.18
	Transcatheter Aortic Valve Replacement (Tavr/Tavi) With Prosthetic Valve: Transapical Exposure (Eq. Left Thoracotomy)	\$1,362.73
	Insertion Of Catheters In Peripheral Blood Vessels Accessed Through Skin For Heart-Lung Machine Support Of Replacement Of Aortic Valve With Prosthetic Valve Through Catheter	\$527.11
	Insertion Of Catheters In Peripheral Blood Vessels, Open Procedure, For Heart-Lung Machine Support Of Replacement Of Aortic Valve With	
	Prosthetic Valve Through Catheter Insertion Of Catheters In Central Blood Vessels For Heart-Lung Machine Support Of Replacement Of Aortic Valve With Prosthetic Valve	\$638.78
	Through Catheter	\$842.90
	Placement And Subsequent Removal Of Device To Protect Brain From Embolism Through Catheter Using Imaging Guidance	\$108.69
	Simple Repair Of Aortic Valve By Open Procedure On Heart-Lung Machine	\$1,951.43
	Complex Repair Of Aortic Valve By Open Procedure On Heart-Lung Machine Construction Of Apical-Aortic Conduit	\$2,312.36 \$1,522.66
	Replacement Of Aortic Valve Using Artificial Valve On Heart-Lung Machine, Open Procedure	\$2,189.50
	Replacement Of Aortic Valve Using Human Donor Valve On Heart-Lung Machine, Open Procedure	\$2,491.52
	Replacement Of Aortic Valve Using Tissue Valve On Heart-Lung Machine, Open Procedure	\$2,202.21
	Replacement, Aortic Valve; With Aortic Annulus Enlargement, Noncoronary Sinus	\$2,904.54
33412	Replacement, Aortic Valve; With Transventricular Aortic Annulus Enlargement (Konno Procedure)	\$2,373.96
	Replacement, Aortic Valve; By Translocation Of Autologous Pulmonary Valve With Allograft Replacement Of Pulmonary Valve (Ross	
	Procedure)	\$2,529.85
	Repair Of Left Ventricular Outflow Tract Obstruction By Patch Enlargement Of The Outflow Tract	\$1,859.19
	Resection Or Incision Of Subvalvular Tissue For Discrete Subvalvular Aortic Stenosis	\$1,836.66
	Ventriculomyotomy (-Myectomy) For Idiopathic Hypertrophic Subaortic Stenosis (Eg, Asymmetric Septal Hypertrophy)	\$1,758.12
	Aortoplasty (Gusset) For Supravalvular Stenosis Replacement Of Mitral Valve With Prosthetic Valve Accessed Through The Skin, Initial	\$1,453.04 \$1,569.46
	Replacement Of Mitral Valve With Prosthetic Valve Accessed Through The Skin, Additional Prosthesis(Es)	\$367.95
	Removal Of Scar Tissue Of Valve Between Left Heart Chambers, Closed Heart Procedure	\$1,265.13
	Removal Of Valve Scar Tissue Between Left Heart Chambers On Heart-Lung Machine, Open Procedure	\$1,449.78
	Valvuloplasty, Mitral Valve, With Cardiopulmonary Bypass	\$2,368.37
	Valvuloplasty, Mitral Valve, With Cardiopulmonary Bypass With Prosthetic Ring	\$2,067.53
	Valvuloplasty, Mitral Valve, With Cardiopulmonary Bypass Radical Reconstruction With Or Without Ring	\$2,119.47
33430	Replacement, Mitral Valve, With Cardiopulmonary Bypass	
1	Replacement Of Aortic Valve By Translocation Of Pulmonary Valve, Replacement Of Pulmonary Valve With Conduit, And Enlargement Of	\$2,748.03
00440		•
	Outflow Tract From Left Lower Chamber Of Heart	\$2,972.82
33460	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass	\$2,972.82 \$2,079.13
33460 33463	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion	\$2,972.82 \$2,079.13 \$1,967.20
33460 33463 33464	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28
33460 33463 33464 33465	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36
33460 33463 33464 33465 33468	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78
33460 33463 33464 33465 33468 33471	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78
33460 33463 33464 33465 33468 33471 33474	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70
33460 33463 33464 33465 33468 33471 33474 33475	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89
33460 33463 33464 33465 33468 33471 33474 33475 33476	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81
33460 33463 33464 33465 33468 33471 33474 33475 33476 33477	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89
33460 33463 33464 33465 33468 33471 33474 33475 33476 33477 33478	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96
33460 33463 33464 33465 33468 33471 33474 33475 33476 33477 33478	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89
33460 33463 33464 33465 33468 33471 33474 33475 33476 33477 33478 33496 33500	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure)	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,326.81 \$1,371.96 \$1,450.55
33460 33463 33464 33465 33468 33471 33474 33475 33476 33477 33478 33496 33500 33501	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96 \$1,450.55 \$1,360.10
33460 33463 33464 33465 33468 33471 33475 33476 33477 33478 33496 33500 33501 33502	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,366.89 \$1,371.96 \$1,450.55 \$1,360.10
33460 33463 33464 33465 33468 33471 33475 33476 33477 33478 33500 33500 33501 33502 33503 33504	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, Without Bypass Anomalous Coronary Artery; Graft, Without Bypass Anomalous Coronary Artery; Graft, With Bypass	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96 \$1,450.55 \$1,360.10 \$976.05
33460 33463 33464 33465 33468 33471 33474 33475 33476 33476 33500 33500 33501 33502 33503 33504 33505	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, Without Bypass Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Tunnel (Takeuchi Procedure)	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96 \$1,450.55 \$1,360.10 \$976.05 \$1,118.03 \$1,118.03 \$1,162.25 \$1,280.52
33460 33463 33464 33465 33468 33471 33474 33475 33476 33477 33478 33500 33501 33502 33503 33503 33505 33505 33505	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; With Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, Without Bypass Repair Of Anomalous Coronary Artery; Graft, With Dypass Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; With Construction From Pulmonary Artery Tunnel (Takeuchi Procedure)	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96 \$1,450.55 \$1,360.10 \$976.05 \$1,118.03 \$1,162.25 \$1,280.15 \$1,280.15 \$1,280.15
33460 33463 33464 33465 33468 33471 33474 33475 33476 33477 33478 33500 33501 33502 33503 33503 33505 33505 33505	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; With Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve; With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, With Bypass Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta Repair Of Anomalous (Eg, Intramural) Aortic Origin Of Coronary Artery By Unroofing Or Translocation	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96 \$1,450.55 \$1,360.10 \$976.05 \$1,118.03 \$1,118.03 \$1,162.25 \$1,280.52
33460 33463 33464 33465 33468 33471 33474 33475 33476 33500 33501 33502 33503 33504 33505 33506 33507	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, Without Bypass Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous (Eg, Intramural) Aortic Origin Of Coronary Artery By Unroofing Or Translocation Endoscopy, Surgical, Including Video-Assisted Harvest Of Vein(S) For Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure)	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96 \$1,450.55 \$1,360.10 \$976.05 \$1,118.03 \$1,162.25 \$1,280.15 \$1,280.15 \$1,280.15
33460 33463 33464 33465 33468 33471 33475 33476 33477 33496 33500 33501 33502 33503 33504 33505 33506 33507	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve Between Lower Right Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery; Graft, Without Bypass Anomalous Coronary Artery; Graft, Without Bypass Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta Repair Of Anomalous (Eg., Intramural) Aortic Origin Of Coronary Artery By Unroofing Or Translocation Endoscopy, Surgical, Including Video-Assisted Harvest Of Vein(S) For Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Harvest Of Artery From Arm For Heart Bypass Graft Using An Endoscope	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96 \$1,450.55 \$1,360.10 \$976.05 \$1,118.03 \$1,118.03 \$1,175.19 \$1,775.19 \$1,491.30
33460 33463 33464 33465 33468 33471 33474 33475 33476 33500 33501 33502 33503 33504 33505 33506 33507	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Arteriovarios Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, Without Bypass Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery By Unroofing Or Translocation Endoscopy, Surgical, Including Video-Assisted Harvest Of Vein(S) For Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Heart Artery Bypass, Single	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96 \$1,450.55 \$1,360.10 \$976.05 \$1,118.03 \$1,162.25 \$1,780.15 \$1,775.19 \$1,491.30
33460 33463 33464 33465 33476 33474 33475 33476 33500 33501 33502 33503 33504 33505 33506 33507 33508 33508 33509 33510 33510	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery; Graft, Without Bypass Anomalous Coronary Artery; Graft, Without Bypass Repair Of Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery By Droofing Or Translocation Endoscopy, Surgical, Including Video-Assisted Harvest Of Vein(S) For Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Harvest Of Artery From Arm For Heart Bypass Graft Using An Endoscope Heart Artery Bypass, Single Heart Artery Bypass, 2 Grafts	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96 \$1,450.55 \$1,180.10 \$976.05 \$1,118.03 \$1,162.25 \$1,280.52 \$1,780.15 \$1,775.19 \$1,491.30
33460 33463 33464 33465 33468 33471 33474 33475 33476 33476 33500 33501 33502 33503 33504 33505 33506 33507 33508 33508 33508 33508 33508 33508 33510 33511 33511	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve; With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; Form Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta Repair Of Anomalous (Eg. Intramural) Aortic Origin Of Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Harvest Of Artery From Arm For Heart Bypass Graft Using An Endoscope Heart Artery Bypass, Single Heart Artery Bypass, 2 Grafts Heart Artery Bypass, 3 Grafts	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96 \$1,450.55 \$1,180.30 \$1,162.25 \$1,780.15 \$1,775.19 \$1,491.30 \$1,491.30
33460 33463 33464 33465 33468 33471 33474 33475 33476 33476 33500 33501 33502 33503 33504 33505 33506 33507 33508 33508 33509 33510 33511 33511	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve; With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Coronary Artery Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery By Dysas Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Anomalous (Eg, Intramural) Aortic Origin Of Coronary Artery By Unroofing Or Translocation Endoscopy, Surgical, Including Video-Assisted Harvest Of Vein(S) For Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Harvest Of Artery From Arm For Heart Bypass Graft Using An Endoscope Heart Artery Bypass, 3 Grafts Heart Artery Bypass, 3 Grafts Heart Artery Bypass, 4 Grafts	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96 \$1,450.55 \$1,180.10 \$976.05 \$1,118.03 \$1,162.25 \$1,280.52 \$1,780.15 \$1,775.19 \$1,491.30
33460 33463 33464 33465 33468 33471 33474 33475 33476 33500 33501 33502 33503 33504 33506 33507 33508 33509 33510 33511 33511 33511	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; With Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve; With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Coronary Artery Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery; Graft, Without Bypass Anomalous Coronary Artery; Graft, Without Bypass Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; With Cortic Origin Of Coronary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Ceg, Intramural) Aortic Origin Of Coronary Artery By Unroofing Or Translocation Endoscopy, Surgical, Including Video-Assisted Harvest Of Vein(S) For Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Harvest Of Artery From Arm For Heart Bypass Graft Using An Endoscope Heart Artery Bypass , 3 Grafts Heart Artery Bypass , 5 Grafts	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96 \$1,450.55 \$1,360.10 \$976.05 \$1,118.03 \$1,162.25 \$1,780.15 \$1,775.19 \$1,491.30 \$1,491.30 \$1,491.30 \$1,491.30 \$1,867.91 \$1,867.91 \$1,867.91 \$1,867.91 \$2,103.60 \$2,152.14 \$2,264.03
33460 33463 33464 33465 33468 33471 33474 33475 33476 33500 33501 33502 33503 33504 33506 33507 33508 33509 33510 33511 33511 33511	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve; With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery Craft, Without Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, Without Bypass Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Anomalous (Eg. Intramural) Aortic Origin Of Coronary Artery By Unroofing Or Translocation Endoscopy, Surgical, Including Video-Assisted Harvest Of Vein(S) For Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Harvest Of Artery From Arm For Heart Bypass Graft Using An Endoscope Heart Artery Bypass , 2 Grafts Heart Artery Bypass , 5 Grafts Heart Artery Bypass , 5 Grafts Heart Artery Bypass , 6 Or More Grafts	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96 \$1,450.55 \$1,180.10 \$976.05 \$1,118.03 \$1,162.25 \$1,280.52 \$1,780.15 \$1,775.19 \$1,491.30
33460 33463 33468 33468 33471 33474 33475 33476 33478 33500 33501 33502 33503 33504 33505 33506 33507 33508 33508 33510 33511 33512 33513 33514 33516	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve, With Ring Insertion Valvuloplasty, Tricuspid Valve, With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery, Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery, Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Anon-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery; From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, With Bypass Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery To Aorta Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery To Aorta Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Heart Artery Bypass, 2 Grafts Heart Artery Bypass, 3 Graf	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96 \$1,450.55 \$1,360.10 \$976.05 \$1,118.03 \$1,118.03 \$1,1775.19 \$1,491.30 \$1,491.
33460 33463 33464 33468 33471 33474 33476 33476 33477 33478 33500 33501 33502 33503 33505 33506 33507 33508 33509 33510 33511 33511 33512 33513 33514 33516	Outflow Tract From Left Lower Chamber Of Heart Valvectorny, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Replacement, Tricuspid Valve; With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery By Bypass Procedure) Repair Of Anomalous (Eg. Intramural) Aortic Origin Of Coronary Artery By Unroofing Or Translocation Endoscopy, Surgical, Including Video-Assisted Harvest Of Vein(S) For Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Havrest Of Artery From Arm For Heart Bypass Graft Seath Heart Artery	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96 \$1,450.55 \$1,360.10 \$976.05 \$1,118.03 \$1,162.25 \$1,280.52 \$1,780.15 \$1,775.19 \$1,491.30 \$1,491.30 \$1,867.91 \$1,867.91 \$1,844.89 \$2,103.60 \$2,152.14 \$2,264.03 \$2,344.22
33460 33463 33464 33476 33476 33476 33476 33478 33500 33501 33502 33503 33504 33506 33507 33508 33508 33509 33510 33511 33512 33513 33514 33516	Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve, With Ring Insertion Valvuloplasty, Tricuspid Valve, With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery, Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery, Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Anon-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery; From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, With Bypass Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery To Aorta Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery To Aorta Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Heart Artery Bypass, 2 Grafts Heart Artery Bypass, 3 Graf	\$2,972.82 \$2,079.13 \$1,967.20 \$1,915.28 \$2,387.36 \$2,119.78 \$1,156.51 \$1,890.70 \$2,017.89 \$1,328.81 \$1,306.89 \$1,371.96 \$1,450.55 \$1,360.10 \$976.05 \$1,118.03 \$1,175.19 \$1,491.30 \$1,544 \$1,39.19 \$1,491.30 \$1,544 \$1,39.19 \$1,867.91 \$1,844.89 \$2,103.60 \$2,152.14 \$2,264.03 \$2,264.03 \$2,264.03 \$2,344.22

33251 Commissed Vern And Amery Heart Artery Sparses, 5 Grafts 33252 Commissed Vern And Amery Heart Artery Sparses, 5 Grafts 33252 Commissed Vern And Amery Heart Artery Sparses, 5 Grafts 33252 Commissed Vern And Amery Heart Artery Sparses, 5 Grafts 33252 Commissed Vern And Amery Heart Artery Sparses, 5 Grafts 33253 Heart Artery Sparses, 5 Grafts 33254 Heart Artery Sparses, 5 Grafts 33255 Heart Artery Sparses, 5 Grafts 33256 Heart Artery Sparses, 5 Grafts 33257 Resourced Of Parager From Heart Artery Art Tree of Sparses Graft Proceeding 33267 Resourced Of Parager From Heart Artery Art Tree of Sparses Graft Proceeding 33267 Consum Of Starnfalture Valve (Arter) Commissed, Proceeding Proceeding 33267 Consum Of Starnfalture Valve (Arter) Commissed Proceeding 33267 Consum Of Starnfalture Valve (Arter) Commissed Proceeding 33267 American Consumer Heart Artery Art Tree of Sparses Graft Proceeding 33267 American Consumer Heart Artery Artery Sparses, 10000 Consum Of American Consumer Artery Sparses Proceeding 33267 Repair Of Complex Consumer Artery Artery Sparses Proceeding 33267 Repair Of Complex Consumer Artery Artery Sparses Proceeding 33267 Repair Of Complex Consumer Artery Artery Sparses Proceeding 33267 Repair Of Complex Consumer Artery Artery Sparses Proceeding 33267 Repair Of Complex Consumer Artery Artery Sparses Proceeding 33267 Repair Of Complex Consumer Artery Artery Sparses Proceeding 33267 Repair Of Complex Consumer Artery Artery Sparses Sparses Proceeding 33267 Repair Of Complex Consumer Artery Spars	<u> </u>		
38322 Combroned Verle And Anney Heart Anney Spanses, S. Gralles Segregation, Courtoury After My Pipesses (Proc. Mon. Grafts) Recognition, Courtoury After Pipesses Procedure, Or Valles Procedure, Worn Tran Orie Month After Original Operation (i.e. Separative) in Segregation, Courtoury After Pipesses Procedure, Or Valles Procedure, Worn Tran Orie Month After Original Operation (i.e. Separative) in Segregation of Segregation (I.e. Se			Fee *F64.F3
33323 Combined Vern And Arthry Heart Army Spasse, SO Tallors Grafts Responsion Commany After Spread Procedure, Votale Procedure, More Than One Month After Original Operation (List Separately. In 32000 Addition To Coole For Phrasy Procedure) 33020 Addition To Coole For Phrasy Procedure) 33020 Addition To Coole For Phrasy Procedure) 33020 Addition To Coole For Phrasy Procedure) 33025 Heart Army Spreas. 2 Grafts 33026 Heart Army Spreas. 2 Grafts 33027 Removed of Phrasy Procedure Arms Spreadown) 32020 Closus Of Attrovertroat Procedure, Inches Provider (For Vernicular Removaling, Svr., Swer, Dor 2006-2006) 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Pla			
Separation, Corrivany Ariety Bypase Procedure) 5002 Addition 10 Celebrary Permany Procedure) 5002 Addition 10 Celebrary Permany Procedure) 5002 Addition 10 Celebrary Permany Procedure 1 Salary 2015 Additional Process of Salary 2015 Additiona			
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33535 Heart Amery Sprases, Springe Great 33555 Heart Amery Sprases, 2 Greats 33556 Heart Amery Sprases, 2 Greats 33556 Heart Amery Sprases, 3 Greats 33557 Heart Amery Sprases			\$502.26
33555 Heart Amery Bysses, 3 of Orthon Cartes 3512 Monocardial Researcion (E.g., Venticular Annurymencomy) 3522 Monocardial Researcion (E.g., Venticular Annurymencomy) 3522 Monocardial Researcion (E.g., Venticular Annurymencomy) 3525 Regular Of Perinterion Venticular Septial Defect, With Ort Wirlord Myocardial Researcion 3528 Regular Of Perinterion Venticular Septial Defect, With Ort Wirlord Myocardial Researcion 3528 Received Of Perinterion Venticular Septial Defect, With Ort Wirlord Myocardial Researcion 3528 Received Of Perinterion Venticular Remote (E.g., Venticular Remo	33533	Heart Artery Bypass, Single Graft	\$1,807.69
33286 Magrardina (Descenting (E.) Wernitzular Ansuryenectory) 33545 Agencrian (Descenting (E.) Wernitzular Ansuryenectory) 33545 Agencrian (Descenting (E.) Wernitzular Septial Delect. With O'r Without Myocardial Resection 33545 Suggiel Avenitzular Researchor Verticular Septial Delect. With O'r Without Myocardial Resection 33545 Suggiel Avenitzular Researchor Verticular Septial Delect. With O'r Without Myocardial Researchor (E.) Verticular Remodeling, Svr. Sever. Dor 33545 Surgicial Avenitzular Researchor (P.) Wernitzular Remodeling, Svr. Sever. Dor 33547 Surface (C.) Particular Researchor (P.) Wernitzular Remodeling, Svr. Sever. Dor 33560 Closure O'l Semillular Valve (Antic O'r Putronary) By Suture O'r Patch 33560 Ansatemosia O'l Putronary Afresia With Internet College (C.) Patch (C.)	33534	Heart Artery Bypass, 2 Grafts	\$1,908.48
33324 Microardial Respection (Fig. Verintorialer Annurymentormy) 33646 Repair of Potentricular Resisonation Procedure, Includes Prosibilities Patch, When Performed (Eg. Verintorial Remodeling, Svr. Saver, Do 33696 Suprial Verintorial Resisonation Procedure, Includes Prosibilities Patch, When Performed (Eg. Verintorial Remodeling, Svr. Saver, Do 33690 Suprial Verintorial Remodeling, Svr. Saver, Do 33690 Subser Of Antorverintorial Verintorial Remodeling, Svr. Saver, Do 33690 Subser Of Antorverintorial Valver (Minit Of Tracepell By Sulver OF Patch) 33690 Subser Of Antorverintorial Valver (Minit Of Tracepell By Sulver OF Patch) 33690 Subser Of Antorverintorial Valver (Minit Of Tracepell By Sulver OF Patch) 33690 Subser Of Antorverintorial Valver (Minit Of Tracepell By Sulver OF Patch) 33690 Subser Of Antorverintorial Valver (Minit Of Tracepell By Sulver OF Patch) 33690 Subser Of Antorverintorial Valver (Minit Of Tracepell By Sulver OF Patch) 33690 Subserverintorial Valver (Minit Of Tracepell By Sulver OF Patch) 33690 Subserverintorial Valver (Minit Of Tracepell By Sulver OF Patch) 33690 Subserverintorial Valver (Minit Of Tracepell By Sulver OF Patch) 33690 Subserverintorial Valver (Minit Of Tracepell By Sulver OF Patch) 33690 Subserverintorial Valver (Minit Of Tracepell Antorial Valver (Minit Of Subser Of Antorial Valver (Minit Of Subser Of Antorial Valver (Minit Of Subser Of Natural Subserver) 3360	33535	Heart Artery Bypass, 3 Grafts	\$2,123.73
33545 Repair Of Posterfaction Ventricular Septial Defect, Win Ch Without Mycoardial Research (Eg. Ventricular Remodeling, Svr., Saver, Dor 35454) Procedures (Surpticular Remodeling, Svr., Saver, Dor 35454) Procedures (Surpticular Remodeling, Svr., Saver, Dor 35457 American Ventricular Remodeling, Svr., Saver, Dor 35457 (Procedure) (Surpticular Remodeling, Svr., Saver, Saver, Saver, Saver, Saver, Saver, Saver, Saver, Saver,			\$2,287.49
Signal Viriationals Restoration Procedure, Includes Prosphetic Prach, When Performed (Eg., Veriticular Remodeling, Svr., Saver, Dor 32,5774, 33572) Removal Of Pique From Heart Arisy At Time Of Bypass Graft Procedure, Open Procedure \$18,082, 33572 (Section 1) (1992) Procedure \$1,100 (Section 1)		, , , , , , , , , , , , , , , , , , , ,	\$2,270.55
33646 Piccioculves) 33767 Removal Of Plaque From Heart Artery At Time Of Bypass Graft Procedure. Open Procedure 33987 Removal Of Plaque From Heart Artery At Time Of Bypass Graft Procedure. 91898 2000 Closuse Of Antroventricular Valve (Maral Of Troughpil) By Suture Of Placin 33980 Closuse Of Antroventricular Valve (Maral Of Troughpil) By Suture Of Placin 33980 Residuation of Plannary Artery To Artar (Damas-Keys-Stanel Procedure) 33980 Residuation of Plannary Artery To Artar (Damas-Keys-Stanel Procedure) 33981 Repair Of Complex Cardiac Anomales (Eg. Single Ventrole With Subspirit Obstruction) By Surgical Enlargement Of Ventricular Septal Defect By Construction Of Replacement Of Standard From Right Of Left Ventricial From Plannary Artery Ventrole With Introventicular Tromel Repair. 1997 Repair Of Plannary Artery (Standard Plannary Artery) Repair Of Repair Of Plannary Artery (Standard Plannary Artery) Repair Of Repai			\$2,658.29
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33647 Repair Of Artial Septal Defect And Ventricular Septal Defect, With Direct Or Patch Closure 33667 Repair Of Incomplete Or Partial Atrioventricular Septal Defect, With Direct Or Patch Closure 33667 Repair Of Incomplete Or Partial Atrioventricular Canal, With Or Without Atrioventricular Valve Repair 33668 Repair Of Intermediate Or Transitional Atrioventricular Canal, With Or Without Atrioventricular Valve Repair 33678 Repair Of Complete Atrioventricular Canal, With Or Without Prosthete Valve 317038 33676 Closure Of Multiple Ventricular Septal Defects; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) 317038 33676 Closure Of Multiple Ventricular Septal Defects; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) 31705 153677 Closure Of Multiple Ventricular Septal Defects; With Removal Of Pulmonary Atrey Band, With Or Without Gusset 31705 153677 Closure Of Multiple Ventricular Septal Defects; With Removal Of Pulmonary Atrey Band, With Or Without Gusset 31705 153684 Closure Ventricular Septal Defect, With Or Without Patch; 31705 153686 Closure Ventricular Septal Defect; With Removal Of Pulmonary Atrey Band, With Or Without Gusset 31705 153686 Closure Ventricular Septal Defect; With Removal Of Pulmonary Atrey Band, With Or Without Gusset 31705 15369 Camplete Repair Of Pulmonary Atrey Band, With Or Without Gusset 31706 Repair Tetralogy Of Fallor Without Pulmonary Atrey Band, With Or Without Gusset 31707 Complete Repair Of Tetralogy Of Fallor Without Pulmonary Atrey Band, With Or Without Gusset 31707 Repair Sinus Of Valsakaya Fistula, With Cardiopulmonary Bypass; 31706 Repair Sinus Of Valsakaya Fistula, With Cardiopulmonary Bypass; 31706 Repair Sinus Of Valsakaya Fistula, With Cardiopulmonary Bypass; 31706 Repair Sinus Of Valsakaya Fistula, With Cardiopulmonary Bypass; 31706 Repair Sinus Of Valsakaya Fistula, With Cardiopulmonary Bypass; 31707 Repair Of Indirection Between Two Upper Heart Chambers Open Heart Procedure 31706 Repair Of Indirection Between Two Upper Heart			
Sapara Repair Of Artial Septal Defect And Ventricular Septal Defect, With Direct Or Patch Closure \$1,749.2			
33860 Repair Of Incomplete Or Partial Atrioventricular Canal (Ositum Primum Atrial Septal Defect), With Or Without Atrioventricular Valve Repair 33865 Repair Of Intermediate Or Transitional Atrioventricular Canal, With Or Without Atrioventricular Valve Repair 33670 Repair Of Complete Atrioventricular Canal, With Or Without Posthetic Valve 35703670 Closure Of Multiple Ventricular Septal Defects; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) 31,761.6 33677 Closure Of Multiple Ventricular Septal Defects; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) 31,761.6 33677 Closure Of Multiple Ventricular Septal Defects; With Removal Of Pulmonary Atery Band, With Or Without Gusset 31,818.7 33681 Closure Ventricular Septal Defect, With Or Without Patch; 31,862.6 33684 Closure Ventricular Septal Defect; With Removal Of Pulmonary Atery Band, With Or Without Gusset 31,823.8 33684 Closure Ventricular Septal Defect; With Removal Of Pulmonary Atery Band, With Or Without Gusset 31,823.8 33690 Banding Of Pulmonary Atery Atery 33690 Banding Of Pulmonary Atery 33690 Complete Repair Tetralogy Of Fallor Without Pulmonary Atery Band, With Or Without Gusset 31,829.0 33691 Complete Repair Tetralogy Of Fallor Without Pulmonary Atery Band, With Or Without Gusset 31,829.0 33694 Repair And Correction Of Four Congenital Defects With Patch 31,879.1 33697 Complete Repair Of Tetralogy Of Fallor Congenital Defect With Absence Of Opening From Right Lower Heart To Main Lung Atery 33702 Repair Sinus Of Valsakva Fistula, With Cardiopulmonary Bypass; 33704 Repair Sinus Of Valsakva Fistula, With Cardiopulmonary Bypass; 33704 Repair Sinus Of Valsakva Aneurysm, With Cardiopulmonary Bypass; 33706 Repair Sinus Of Valsakva Aneurysm, With Cardiopulmonary Bypass; 33707 Repair Sinus Of Valsakva Aneurysm, With Cardiopulmonary Bypass; 33708 Repair Of Anomalous Venous Stenosis 33718 Repair Of Pulmonary Venous Stenosis 3372 Repair Of Pulmonary Venous Stenosis 3373 Repair Of Venous Stenosis 3373 Repair Of Venous Stenosis 3374 Repair		, ,	
33668 Repair Of Intermediate Or Transitional Arioventricular Canal, With Or Without Arioventricular Valve Repair \$1,841.1 33676 Repair Of Complete Arioventricular Canal, With Or Without Prosthetic Valve \$1,703.3 3676 Closure Of Multiple Ventricular Septal Defects, with Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,856.6 33676 Closure Of Multiple Ventricular Septal Defects, With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,857.7 33687 Closure Of Multiple Ventricular Septal Defects, With Removal Of Pulmonary Artery Band, With Or Without Gusset \$1,818.7 33681 Closure Ventricular Septal Defect, With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,836.5 33688 Closure Ventricular Septal Defect, With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,836.5 33688 Closure Ventricular Septal Defect, With Removal Of Pulmonary Artery Band, With Or Without Gusset 33690 Banding Of Pulmonary Artery \$1,828.6 33690 Banding Of Pulmonary Artery \$1,828.6 33690 Repair And Correction Of Four Congenital Heart Defects With Patch \$1,877.1 33691 Complete Repair Of Tetralogy Of Fallot Congenital Defect Of Heart With Absence Of Opening From Right Lower Heart To Main Lung Artery \$1,778.7 33702 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass: \$1,348.6 33710 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass: \$1,348.7 33724 Repair Of Insular Patrial Anomalous Pulmonary Valvous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,334.8 33726 Repair Of Pulmonary Valvous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,334.8 33736 Repair Of Pulmonary Valvous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,334.8 33737 Repair Of Or Or Intariatum Or Supravalvular Mirtal Ring By Resection Of Left Artial Membrane \$1,346.6 33737 Interpair Of Vall Between Two Upper Heart Chambers, Closed Heart Procedure 15,134.6 1	33047	Trainin Sopial Scient rate Voluntum Scient rate Police Critical Scientific Control Con	ψ1,7 43.20
33668 Repair Of Intermediate Or Transitional Arioventricular Canal, With Or Without Arioventricular Valve Repair \$1,841.1 33676 Repair Of Complete Arioventricular Canal, With Or Without Prosthetic Valve \$1,703.3 3676 Closure Of Multiple Ventricular Septal Defects, with Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,856.6 33676 Closure Of Multiple Ventricular Septal Defects, With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,857.7 33687 Closure Of Multiple Ventricular Septal Defects, With Removal Of Pulmonary Artery Band, With Or Without Gusset \$1,818.7 33681 Closure Ventricular Septal Defect, With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,836.5 33688 Closure Ventricular Septal Defect, With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,836.5 33688 Closure Ventricular Septal Defect, With Removal Of Pulmonary Artery Band, With Or Without Gusset 33690 Banding Of Pulmonary Artery \$1,828.6 33690 Banding Of Pulmonary Artery \$1,828.6 33690 Repair And Correction Of Four Congenital Heart Defects With Patch \$1,877.1 33691 Complete Repair Of Tetralogy Of Fallot Congenital Defect Of Heart With Absence Of Opening From Right Lower Heart To Main Lung Artery \$1,778.7 33702 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass: \$1,348.6 33710 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass: \$1,348.7 33724 Repair Of Insular Patrial Anomalous Pulmonary Valvous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,334.8 33726 Repair Of Pulmonary Valvous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,334.8 33736 Repair Of Pulmonary Valvous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,334.8 33737 Repair Of Or Or Intariatum Or Supravalvular Mirtal Ring By Resection Of Left Artial Membrane \$1,346.6 33737 Interpair Of Vall Between Two Upper Heart Chambers, Closed Heart Procedure 15,134.6 1	33660	Repair Of Incomplete Or Partial Atrioventricular Canal (Ostium Primum Atrial Septal Defect). With Or Without Atrioventricular Valve Repair	\$1,691.33
\$1,896.5 Closure Of Multiple Ventricular Septal Defects: With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,751.6	33665	Repair Of Intermediate Or Transitional Atrioventricular Canal, With Or Without Atrioventricular Valve Repair	\$1,841.16
33677 Closure Of Multiple Ventricular Septal Defects; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,515.6 Closure Of Single Ventricular Septal Defects; With Removal Of Pulmonary Artery Band, With Or Without Gusset \$1,818.7 33681 Closure Of Single Ventricular Septal Defect; With Or Without Patch; \$1,785.8 33684 Closure Ventricular Septal Defect; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,635.8 33684 Closure Ventricular Septal Defect; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,635.8 33680 Closure Ventricular Septal Defect; With Removal Of Pulmonary Artery Sand, With Or Without Gusset \$1,635.8 33680 Closure Ventricular Septal Defect; With Removal Of Pulmonary Artery Sand, With Or Without Gusset \$1,635.8 33680 Closure Ventricular Septal Defect; With Removal Of Pulmonary Artery Sand With Or Without Gusset \$1,625.8 33680 Closure Ventricular Septal Defect; With Removal Of Pulmonary Artery Sand With Or Without Gusset \$1,625.8 4 33690 Complete Repair Tetralogy Of Fallot Without Pulmonary Artery Sand Repair And Correction Of Four Congenital Defects With Patch \$1,627.7 33702 Repair Sinus Of Valsava Fistual, With Cardiopulmonary Bypass; \$1,348.0 Sand Sand Sand Sand Sand Sand Sand Sand	33670	Repair Of Complete Atrioventricular Canal, With Or Without Prosthetic Valve	\$1,703.99
Safety Closure Of Multiple Ventricular Septal Defects: With Removal Of Pulmonary Artery Band, With Or Without Gusset \$1,818.7	33675	Closure Of Multiple Ventricular Septal Defects;	\$1,896.39
33681 Closure Of Single Ventricular Septal Defect; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,785.8 33688 Closure Ventricular Septal Defect; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,635.5 33688 Closure Ventricular Septal Defect; With Removal Of Pulmonary Artery Band, With Or Without Gusset \$1,635.5 33690 Banding Of Pulmonary Artery \$1,169.1 33692 Complete Repair Tetalogy Of Fallot Without Pulmonary Artery Band, With Or Without Gusset \$1,877.1 33692 Repair And Correction Of Four Congenital Heart Defects With Patch \$1,877.1 33697 Complete Repair Congenital Heart Defects With Patch \$1,776.7 33702 Repair Sinus Of Valsava Fistula, With Cardiopulmonary Bypass; \$1,349.0 33710 Repair Sinus Of Valsava Fistula, With Cardiopulmonary Bypass; \$1,349.0 33710 Repair Sinus Of Valsava Fistula, With Cardiopulmonary Bypass; \$1,349.0 33724 Repair Of Isolated Partial Anomalous Pulmonary Venous Pypass \$1,349.1 33726 Repair Of Isolated Partial Anomalous Pulmonary Venous Return (Eg., Scimitar Syndrome) \$1,349.6 33730 Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,349.6 33731 Repair Of Or Tritaritamum Or Supravalurlar Mitral Ring By Resection Of Left Artial Membrane \$1,436.6 33736 Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure \$1,346.6 33737 Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure \$1,346.7 33740 Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging 33741 Guidance \$33740 Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging 33740 Creation Of Shunt From Bosconding Aorts To Pulmonary (Lung) Artery 33740 Placement Of Shunt From Descending Aorts To Pulmonary (Lung) Artery 33740 Placement Of Shunt From Posconding Aorts To Pulmonary (Lung) Artery 33740 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung 33740 Placement Of Shunt From Vena Cav	33676	Closure Of Multiple Ventricular Septal Defects; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic)	\$1,751.67
Sassa Closure Ventricular Septal Defect; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,636.5 33688 Closure Ventricular Septal Defect; With Removal Of Pulmonary Artery Band, With Or Without Gusset \$1,1628.1 33690 Banding Of Pulmonary Artery \$1,168.1 33690 Banding Of Pulmonary Artery \$1,168.1 33691 Repair Totalogy Of Fallot Without Pulmonary Artersia; \$1,879.1 33694 Repair And Correction Of Four Congenital Heart Defects With Patch \$1,877.1 33792 Repair Of Tetralogy Of Fallot Congenital Defect Of Heart With Absence Of Opening From Right Lower Heart To Main Lung Artery \$1,778.2 33702 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; \$1,348.0 33710 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; \$1,349.1 33720 Repair Sinus Of Valsalva Aneurysm, With Cardiopulmonary Bypass; \$1,349.1 33721 Repair Of Isolated Partial Anomalous Pulmonary Venous Return (Eg. Scimitar Syndrome) \$1,334.8 33722 Repair Of Valsalva Partial Anomalous Pulmonary Venous Return (Eg. Scimitar Syndrome) \$1,334.8 33732 Repair Of Pulmonary Venous Stenos \$1,954.6 33733 Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,935.4 33734 Repair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane \$1,436.6 33735 Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure \$1,134.6 33736 Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure \$1,134.6 33736 Enlargement Of Wall Between Two Upper Heart Chambers (Pole Heart Pole Rev.) (Pol			\$1,818.76
33688 Closure Ventricular Septal Defect; With Removal Of Pulmonary Artery Band, With Or Without Gusset \$1,628.63 33690 Complete Repair Tetralogy Of Fallot Without Pulmonary Atresia; \$1,879.1 33691 Repair And Correction Of Four Congenital Heart Defects With Patch \$1,877.1 33697 Complete Repair Of Tetralogy Of Fallot Congenital Defect Of Heart With Absence Of Opening From Right Lower Heart To Main Lung Artery \$1,776.7 33702 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; \$1,348.0 33710 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; \$1,348.0 33720 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; \$1,349.1 33724 Repair Of Isolated Partial Anomalous Pulmonary Venous Return (Eg, Scimitar Syndrome) \$1,334.0 33726 Repair Of Vendromary Venous Stenous Peturn (Eg, Scimitar Syndrome) \$1,334.0 33726 Repair Of Pulmonary Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,935.4 33730 Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,935.4 33735 Balloson Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure \$1,1366.2 33737 Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure \$1,366.2 33736 Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$1,336.6 33746 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$1,236.6 33756 Placement Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$1,336.6 33746 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$1,337.6 33756 Placement Of Shunt For Descending Aorta To Pulmonary (Lung) Artery \$1,152.4 33760 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery \$1,152.4 33761 Placement Of Shunt From D			\$1,785.87
33890 Banding Of Pulmonary Artery \$1,1631 \$1,879. \$1,879			\$1,635.52
Standard			
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Complete Repair Of Tetralogy Of Fallot Congenital Defect Of Heart With Absence Of Opening From Right Lower Heart To Main Lung Artery 33702 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; 33710 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; 33720 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; 33721 Repair Sinus Of Valsalva Aneurysm, With Cardiopulmonary Bypass 33722 Repair Sinus Of Valsalva Aneurysm, With Cardiopulmonary Bypass 33724 Repair Of Pulmonary Venous Peturn (Eg. Scimitar Syndrome) 33726 Repair Of Pulmonary Venous Stenosis 33730 Complete Repair Of Anomalous Pulmonary Venous Return (Eg. Scimitar Syndrome) 33730 Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types) 33731 Repair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane 33732 Repair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane 33738 Balloon Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure 33737 Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure 33737 Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure 33737 Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure 33737 Enlargement Of Wall Between Two Upper Heart Chambers With Correction Of Blood Flow, Open Heart Procedure 33741 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance 33745 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance 33750 Shunt; Subclavian To Pulmonary Attery (Blalock-Taussig Type Operation) 33760 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery 33761 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery 33762 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung 33768 Placement Of Shunt From Vena Cava To Pulmonar			
Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; \$1,348.0 33710 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; With Repair Of Ventricular Septal Defect \$1,775.8 33720 Repair Sinus Of Valsalva Aneurysm, With Cardiopulmonary Bypass \$1,348.1 33724 Repair Of Isolated Partial Anomalous Pulmonary Venous Return (Eg. Scimitar Syndrome) \$1,334.8 33726 Repair Of Pulmonary Venous Stenosis \$1,954.6 33730 Complete Repair Of Anomalous Pulmonary Venous Return (Eg. Scimitar Syndrome) \$1,935.4 33730 Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,935.4 33730 Expair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane \$1,346.6 33731 Repair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane \$1,346.6 33732 Repair Of Vall Between Two Upper Heart Chambers, Closed Heart Procedure \$1,346.6 13736 Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure Incision Of Partition Between Upper Chambers Of Heart To Allow Blood Flow For Congenital Heart Defects, Via Catheter Using Imaging 33741 Guidance \$634.7 33745 Creation Of Short For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$33745 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$33746 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$33745 Placement Of Shunt From Ascending Aorta To Pulmonary (Lung) Artery \$1,136.4 33766 Placement Of Shunt From Poseending Aorta To Pulmonary (Lung) Artery \$1,136.4 33767 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery \$1,136.4 33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure) \$33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure) \$33776 Repair Of A Group O	33694	Repair And Correction Or Four Congenital Heart Defects With Patch	\$1,877.10
Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; \$1,348.0 33710 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; With Repair Of Ventricular Septal Defect \$1,775.8 33720 Repair Sinus Of Valsalva Aneurysm, With Cardiopulmonary Bypass \$1,348.1 33724 Repair Of Isolated Partial Anomalous Pulmonary Venous Return (Eg. Scimitar Syndrome) \$1,334.8 33726 Repair Of Pulmonary Venous Stenosis \$1,954.6 33730 Complete Repair Of Anomalous Pulmonary Venous Return (Eg. Scimitar Syndrome) \$1,935.4 33730 Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,935.4 33730 Expair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane \$1,346.6 33731 Repair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane \$1,346.6 33732 Repair Of Vall Between Two Upper Heart Chambers, Closed Heart Procedure \$1,346.6 13736 Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure Incision Of Partition Between Upper Chambers Of Heart To Allow Blood Flow For Congenital Heart Defects, Via Catheter Using Imaging 33741 Guidance \$634.7 33745 Creation Of Short For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$33745 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$33746 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$33745 Placement Of Shunt From Ascending Aorta To Pulmonary (Lung) Artery \$1,136.4 33766 Placement Of Shunt From Poseending Aorta To Pulmonary (Lung) Artery \$1,136.4 33767 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery \$1,136.4 33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure) \$33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure) \$33776 Repair Of A Group O	33697	Complete Renair Of Tetralogy Of Fallot Congenital Defect Of Heart With Absence Of Opening From Right Lower Heart To Main Lung Artery	\$1 778 7 6
33710 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; With Repair Of Ventricular Septal Defect			
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And The Root Translocation View Ventrocular Septial Defect And Pulmonary Stenoses Repair (in Natadoh Procedure), Without Control Option 32,765.0 33776 [Recipion For Area And Regular Of Wall Stenases Two Lower Heart Chambers. With Representation 32,006.1 33776 [Recipion For Area And Recipion Control Chambers and Procedure] 32,765.0 33776 [Recipion Control Chambers And Procedure] 32,765.0 33776 [Recipion Chambers Pulmonary Annual			
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33786 Reinplantion Of A Conception of Policy William Delects With Retirection Of Blood Flow 33800 Annie Strepension (Antroposy) For Trached Decompression (Eg. Por Trached Section Of Secti			\$3,009.12
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38800 Division Of Aberrant Vessel (Vascoult Prig); With Recrusationnois 31,1016 33110 Dibiteration Of Antiparturous Septial Disfect Without Cardiopulmonary Spasis 31,804.0 3318.1 331			\$955.02
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38313 Obliteration Of Anonpulmonary Septial Delect Willing Cardiopulmonary Bypass \$1,30314 All Obliteration Of Anonpulmonary Septial Delect Willing Cardiopulmonary Bypass \$1,3031 33202 Repair Of Extern Ductus Anteriosus: By Ligation \$3222 Repair Of Congrenal Heart Delect From Pulmonary (Lung) Artery To Aorta, Patient Younger Than 18 Years And Obligation \$3222 Repair Of Congrenal Feet Delect From Pulmonary (Lung) Artery To Aorta, Patient 18 Years And Obligation \$3223 Repair Of Congrenal Feet Delect From Pulmonary (Lung) Artery To Aorta, Patient 18 Years And Obligation \$3224 Repair Of Congrenal Feet Delect From Pulmonary (Lung) Artery To Aorta, Patient 18 Years And Obligation \$3224 Repair Of Congrenal Feet Delect From Pulmonary (Lung) Artery To Aorta, Patient 18 Years And Obligation \$3224 Repair Of Congrenal Feet Delect From Pulmonary (Lung) Artery To Aorta, Patient Pulmonary (Lung) Artery 18 Years And Obligation \$3225 Repair Of Congrenal Feet Delect From Pulmonary (Lung) Artery 18 Aorta Andrews Andre	33803	Division Of Aberrant Vessel (Vascular Ring); With Reanastomosis	\$1,116.11
38320 Repair Of Fatent Ductus Americaus: By Ligation 5746. 3822 Repair Of Congenital Heart Detect From Pulmonary (Lung) Artery To Aorta, Patient Younger Than 18 Years And Older 5746. 3822 Repair Of Congenital Heart Detect From Pulmonary (Lung) Artery To Aorta, Patient 19 Years And Older 5746. 3822 Repair Of Congenital Heart Detect From Pulmonary (Lung) Artery To Aorta, Patient 19 Years And Older 5746. 3824 Repair Of Congenitation Of Aorta, With Or Without Associated Patient Ductus Arterious, With Graft 5746. 3825 Repair Of Congenitation Of Aorta, With Or Without Associated Patient Ductus Arterious, With Graft 5746. 3825 Repair Of Hypoplasts Of Interrupted Aorta Arch Using Autogenous Or Prosthetic Material, Without Cardiopulmonary Bypass 51,271. 3825 Repair Of Hypoplasts Of Interrupted Aorta Arch Using Autogenous Or Prosthetic Material, Without Cardiopulmonary Bypass 51,271. 3825 Repair Of Asconding Aorta With Graft On Heart-Lung Machine, For Separation Of Wall Of Aorta (Dissection) 22,335. 3826 Repair Of Asconding Aorta With Graft On Heart-Lung Machine, For Separation Of Wall Of Aorta (Dissection) 22,335. 3826 Repair Of Control Machine Aorta Aort			\$1,084.94
39322 Sepair Of Congential Heart Detect From Pulmonary (Lung) Artery To Antar, Patent Younger Than 18 Years 39408 Repair Of Congential Heart Detect From Pulmonary (Lung) Artery To Antar, Patent 18 Years And Older \$1,003.33401 Sepair Of Congential Heart Detect From Pulmonary (Lung) Artery To Antar, Patent 18 Years And Older \$1,003.33401 Section Of Concretation Of Antar, With Or Without Associated Patent Ductus Arterious, With Direct Annationaries \$1,103.33401 Section Of Concretation Of Antar, With Or Without Associated Patent Ductus Arterious With Graft Concretation Of Antar, With Or Without Associated Patent Ductus Arterious With Graft Subdavian Artery Or Prosthetic Statistics (Concretation Of Antar, With Or Without Associated Patent Ductus Arterious With Graft Graft Subdavian Artery Or Prosthetic Statistics (With Concretation Of Antar, With Or Without Associated Patent Ductus Arterious With Graft Concretation Of Antar Antary Statistics (With Concretation Artery Statistics) Statistics (Concretation Of Antary With Graft Or Heart-Lung Auditorious Or Prosthetic Miteriots With Concretation Patents Statistics (Concretation Of Antary Antary Statistics) Statistics (Concretation Of Antary Antary Statistics) Statistics (Concretation Of Antary Antary Statistics) Statistics (Concretation Antary Statistics) Statistics (Concretation Of Antary Antary Statistics) Statistics (\$1,330.12
33828 Exement Of Congretation Annual New York Section Section Of Congretation Annual New York Section Section Of Congretation Of Annual New York Section Sec	33820	Repair Of Patent Ductus Arteriosus; By Ligation	\$939.09
Sabel Excision Of Coardistant Of Anati, With Or Without Associated Patent Ductus Anterious, With Direct Anasterosis Sabel Excision Of Coardistant Of Anati, With Or Without Associated Patent Ductus Anterious, With Graft Sabel Sab	33822	Repair Of Congenital Heart Defect From Pulmonary (Lung) Artery To Aorta, Patient Younger Than 18 Years	\$746.01
Stabild Circiam Of Coardated Of Anal, With Or Without Associated Patern Ductus Antriosus, With Graft Stabild Coardated Of Anal, With Or Without Associated Patern Ductus Antriosus, With Graft Stabild Coardated Of Anal, With Or Without Associated Patern Ductus Antriosus (With Graft Stabild Coardated Of Anal, With Or Without Associated Patern Ductus Antriosus (Without Cardiopulmonary Bypass Stabild Material As Quaser For Enlargement Stabild Coardated Patern Ductus Antriosus Without Cardiopulmonary Bypass Stabild Coardated Coardated Patern Ductus Antriosus Without Cardiopulmonary Bypass Stabild Coardated Coardated Coardated Patern Ductus Antriosus Without Cardiopulmonary Bypass Stabild Coardated Coard	33824	Repair Of Congenital Heart Defect From Pulmonary (Lung) Artery To Aorta, Patient 18 Years And Older	\$1,033.48
Existion Of Coardstain Of Aorta, With Or Without Associated Patent Ductus Anteriosus Repair Using Either Left Succlavian Artery of Prosthetic \$1,236.8 (Material Acquiser) Exemption (19) (Psychoptatic Or Interrupted Aorta Arch Using Autogenous Or Prosthetic Material: Without Cardiopulmonary Bypass \$1,236.4 (19) (19) (19) (19) (19) (19) (19) (19)	33840	Excision Of Coarctation Of Aorta, With Or Without Associated Patent Ductus Arteriosus; With Direct Anastomosis	\$1,204.77
Exission Of Coartation Of Aorta, With Or Vithout Associated Patent Ductus Anneissus Repair Using Either Left Subclavian Artery of Prosthetic S1,2304. 33567, Repair Of Hypoplastic Or Interrupted Aorta Arch Vising Autogenous Or Prosthetic Material: Without Cardiopulmonary Bypass 51,2216. 33568, Repair Of Hypoplastic Or Interrupted Aorta Arch Vising Autogenous Or Prosthetic Material: With Cardiopulmonary Bypass 51,772.6. 33569, Repair Of Assending Aorta With Graft On Heart-Lung Machine, For Separation Of Wall Of Aorta (Dissection) 52,395.4. 33589, Repair Of Assending Aorta With Graft On Heart-Lung Machine, For Separation Of Wall Of Aorta (Dissection) 52,395.4. 33583 [Repair Of Assending Aorta On Heart-Lung Machine, With Replacement Of Root Of Aorta And Reconstruction Of Heart 33,000.3. 33684 [Separation Of Graft To Assending Aorta On Heart-Lung Machine, With Replacement Of Root Of Aorta And Reconstruction Of Heart 33,000.3. 33685 [Separation Of Graft To Assending Aorta On Heart-Lung Machine, With Replacement Of Root Of Aorta And Reconstruction Of Heart 33,000.3. 33686 [Separation Of Aorta Charles And Carles Machine, With Replacement Of Root Of Aorta And Reconstruction Of Heart 33,000.3. 33787 [Repair Of Transverse Acrd Or Aorta With Graft Of Heart-Lung Machine, With Replacement Of Root Of Aorta And Reconstruction Of Heart 33,000.3. 33787 [Repair Of Transverse Acrd Or Aorta With Graft Of Heart-Lung Machine, With Replacement Of Root Of Aorta And Reconstruction Of Heart 33,000.3. 33887 [Repair Of Descending Aorta In Chest With Initial Prosthesis Inserted Through Aorta Aorta Carles Aorta A	33845	Excision Of Coarctation Of Aorta, With Or Without Associated Patent Ductus Arteriosus; With Graft	\$1,167.31
State State Chrypoplastic Of Interrupted Ancie Arch Using Autogenous OF Prostate Material, Without Cardiopulmonary Bypass \$1,272.6		Excision Of Coarctation Of Aorta, With Or Without Associated Patent Ductus Arteriosus Repair Using Either Left Subclavian Artery Or Prosthetic	
33858 Repair Of Physpolastic Of Interrupted Annic Arch Using Autogenous OF Prostretic Material, With Cardiopulmonary Bypass 33858 Repair Of Ascending Anata With Graft Of Heart-Lung Machine, For Disease Other Than Separation Of Wall Of Anata (Dissection) 52,3935, 33859 Repair Of Ascending Anata With Graft Of Heart-Lung Machine, For Disease Other Than Separation Of Wall Of Anota (Dissection) 52,3935, 33859 Repair Of Ascending Anata With Graft Of Heart-Lung Machine, With Replacement Of Grot Of Anata And Reconstruction Of Heart 53,000-1 53,0	33851	Material As Gusset For Enlargement	\$1,236.46
Sag53 Repair Of Ascending Aorta With Graft on Heart-Lung Machine, For Separation Of Wall Of Aorta (Dissection) \$2,335.4 33863 Placement Of Graft To Ascending Aorta On Heart-Lung Machine, For Bisease Other Than Separation Of Wall Of Aorta (Dissection) \$2,335.4 33863 Placement Of Graft To Ascending Aorta On Heart-Lung Machine, With Replacement Of Root Of Aorta And Reconstruction Of Heart \$3,002.1 33864 Placement Of Graft To Ascending Aorta On Heart-Lung Machine, With Remodeling Of Root Of Aorta And Reconstruction Of Heart \$3,009.0 33877 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$2,815.4 33877 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$3,807.5 33877 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$3,807.5 33877 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$3,807.5 33877 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$3,807.5 33877 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$3,807.5 33877 Repair Of Desconding Aorta in Chest Life Mills Prosthesis Inserted Through Artery \$1,509.5 33887 Repair Of Desconding Aorta in Chest Life Mills Prosthesis Inserted Through Artery \$1,509.5 33880 Repair Of Defect Of Aorta in Chest, Irialia Extension \$3,809.5 3389.5 3389.6 Repair Of Defect Of Aorta in Chest, Irialia Extension \$3,809.5 3389.5 3389.6 Incision On One Side Of Neck To Transfet Chest Artery To Neck Artery Plus Endousscular Procedure To Repair Chest Aorta, Open Procedure \$3,809.5 3389.7 Repair Of Aorta By Insertion Of Stant Arons Stagin Side Branches \$3,809.7 3389.7 Repair Of Aorta By Insertion Of Stant Arons Stagin Side Branches \$3,809.7 3389.7 Repair Of Aorta By Insertion Of Stant Arons Stagin Side Branches \$3,809.7 3399.7 Repeared Of Aorta By Insertion Of Stant Arons Stagin Side Branches \$3,809.7 3399.7 Repeared Of Aorta By Insertion Of Stant Arons Stagin Side Branches \$3,809.7 3399.7 Repeared Of Aorta By Insertion Of Stant Arons Stagin Side Branches \$3,809.7	33852	Repair Of Hypoplastic Or Interrupted Aortic Arch Using Autogenous Or Prosthetic Material; Without Cardiopulmonary Bypass	\$1,221.65
33558 Repair Of Ascending Aorta With Graft On Heart-Lung Machine, For Separation Of Wall Of Aorta (Dissection) \$2,335.4 33580 Repair Of Ascending Aorta With Graft On Heart-Lung Machine, For Dissease Offer Than Separation Of Wall Of Aorta (Dissection) \$2,335.4 33580 Pleament Of Graft To Ascending Aorta On Heart-Lung Machine, With Replacement Of Root Of Aorta And Reconstruction Of Heart \$3,002.1 3360 Francis Of The Ascending Aorta On Heart-Lung Machine, With Remodeling Of Root Of Aorta And Reconstruction Of Heart \$3,009.3 3387 Pleament Of Graft To Ascending Aorta On Heart-Lung Machine \$2,355.1 3387 Pleament Of Graft To Ascending Aorta On Heart-Lung Machine \$2,355.1 3387 Pleament Of Graft To Ascending Aorta On Heart-Lung Machine \$2,355.1 3387 Pleament Of Broad Control Cont			\$1,772.69
Repair Of Ascending Aoria With Graft On Heart-Lung Machine, For Disease Other Than Separation Of Wall Of Aoria (Diseaction)			\$2,935.41
33886 Graft To Half Ol Aroita Enterpy Arch \$3,09.0 \$38387 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$2,815.4 \$3,3877 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$2,815.4 \$3,9375 Descending Thoracia Chart Graft, With Or Without Bypass \$3,255.5 \$3,9377 Repair Of Thoracoabdominal Aortic Aneurysm With Graft, With Or Without Cardiopulmonary Bypass \$3,107.5 \$3,1	33859	Repair Of Ascending Aorta With Graft On Heart-Lung Machine, For Disease Other Than Separation Of Wall Of Aorta (Dissection)	\$2,383.45
33886 Graft To Half Ol Aroita Enterpy Arch \$3,09.0 \$38387 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$2,815.4 \$3,3877 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$2,815.4 \$3,9375 Descending Thoracia Chart Graft, With Or Without Bypass \$3,255.5 \$3,9377 Repair Of Thoracoabdominal Aortic Aneurysm With Graft, With Or Without Cardiopulmonary Bypass \$3,107.5 \$3,1			
3881 Sapar Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$2815. 38871 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$2815. 38871 Repair Of Transverse Arch Of Aorta With Critifon Heart-Lung Machine \$2815. 38877 Repair Of Descending Aorta in Cheest With Initial Prosthesis Inserted Through Artery \$25.55.1 38801 Repair Of Descending Aorta in Cheest With Initial Prosthesis Inserted Through Artery \$3.3878 (Repair Of Descending Aorta in Cheest With Initial Prosthesis Inserted Through Artery \$3.3878 (Repair Of Descending Aorta in Cheest Milling Origin Of Left Subdavian Artery With Initial Prosthesis Inserted Through Catheter \$1.32.40. 38838 Repair Of Defect Of Aorta in Cheest, Additional Extension \$3.384. 38848 Repair Of Defect Of Aorta in Cheest, Additional Extension \$3.384. 38848 Repair Of Defect Of Aorta in Cheest, Additional Extension \$3.389. 38848 Repair Of Defect Of Aorta in Cheest, Additional Extension \$3.389. 38858 Incision On Cone Side Of Neck To Transfer Cheest Artery To Neck Artery Plus Endovascular Procedure To Repair Chest Aorta, Open Procedure \$67.74 38891 Descending Throacic Aorta, By Meck Incision \$3.3891. 38924 Repair Of Aorta By Insertion Of Steret Across Major Side Branches \$9.3930. 38935 Repair Of Aorta By Insertion Of Steret Across Major Side Branches \$3.3930. 38936 Repair Of Aorta By Insertion Of Steret Across Major Side Branches \$3.3930. 39937 Pleacement Of Stere in Fulmonary Artery With Normal Anatomical Connections, On One Side Of Body \$47.96. 39938 Pleacement Of Stere in Fulmonary Artery With Normal Anatomical Connections, On One Side Of Body \$47.96. 39939 Pleacement Of Stere in Fulmonary Artery With Acromal Anatomical Connections, On One Side Of Body \$47.06. 39930 Pleacement Of Stere in Fulmonary Artery With Acromal Anatomical Connections, On One Side Of Body \$47.06. 39930 Pleacement Of Stere in Fulmonary Artery With Report Of Stere Across With Confidential Program Artery With Acromal Anatomical Connections, On Both Sides Of Body \$47.06. 39930 Pleacement O			\$3,022.19
Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$2.815.6	33864	Placement Of Graft To Ascending Aorta On Heart-Lung Machine, With Remodeling Of Root Of Aorta And Reconstruction Of Heart	\$3,090.94
\$2,355.1	33866	Graft To Half Of Aortic Artery Arch	\$881.31
33317 Repair Of Thoracoebdominal Acrice Aneurysm With Graft, With Or Without Cardiopulmonary Bypass \$3,1075	33871	Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine	\$2,815.49
S1,339.53 Repair Of Descending Aonta in Chest With Initial Prosthesis Inserted Through Artery	33875	Descending Thoracic Aorta Graft, With Or Without Bypass	\$2,355.19
Sapar Repair Of Desconding Aorta in Chest Including Origin Of Left Subclavian Artery With Initial Prosthesis Inserted Through Catheter \$1,320.4	33877	Repair Of Thoracoabdominal Aortic Aneurysm With Graft, With Or Without Cardiopulmonary Bypass	\$3,107.58
Sabasa Repair Of Defect Of Aorta in Chest, Initial Extension \$354.1			\$1,539.51
Sasat Repair Of Defect Of Aorta in Chest, Additional Extension Sasat S	33881	Repair Of Descending Aorta In Chest Including Origin Of Left Subclavian Artery With Initial Prosthesis Inserted Through Catheter	\$1,320.41
Sabba Insertion Of Extension Prosthesis After Previous Repair Of Descending Aorta In Chest \$829.4	33883	Repair Of Defect Of Aorta In Chest, Initial Extension	\$959.97
Sabasa	33884	Repair Of Defect Of Aorta In Chest, Additional Extension	\$334.15
Bypass Graft, With Other Than Vein, Transcervical Retropharyngeal Carotid-Carotid, Performed In Conjunction With Endovascular Repair Of \$814.7 33894 Repair Of Aorta By Insertion Of Stent Across Major Side Branches \$793.0 33895 Repair Of Aorta By Insertion Of Stent Not Crossing Major Side Branches \$793.0 33895 Repair Of Aorta By Insertion Of Stent Not Crossing Major Side Branches \$793.0 33895 Repair Of Aorta By Insertion Of Stent Not Crossing Major Side Branches \$793.0 33890 Repair Of Aorta By Insertion Of Stent Not Crossing Major Side Branches \$793.0 33890 Repair Of Aorta By Insertion Of Stent In Pulmonary Artery With Normal Anatomical Connections, On One Side Of Body \$479.6 \$30.5 33901 Repair Of Stent In Pulmonary Artery With Abnormal Anatomical Connections, On One Side Of Body \$630.5 33902 Recement Of Stent In Pulmonary Artery With Abnormal Anatomical Connections, On One Side Of Body \$603.3 3903 Recement Of Stent In Pulmonary Artery With Abnormal Anatomical Connections, On One Side Of Body \$717.7 33904 Recement Of Additional Stent In Pulmonary Artery With Abnormal Anatomical Connections, On Both Sides Of Body \$717.7 33904 Repair Of Additional Stent In Pulmonary Artery Stent S	33886	Insertion Of Extension Prosthesis After Previous Repair Of Descending Aorta In Chest	\$829.46
38398 Repair Of Aorta By Insertion Of Stent Across Major Side Branches \$793.0		Bypass Graft, With Other Than Vein, Transcervical Retropharyngeal Carotid-Carotid, Performed In Conjunction With Endovascular Repair Of	\$677.48
Sassistance			
33890 Placement Of Stent In Pulmonary Artery With Normal Anatomical Connections, On One Side Of Body \$479.6		, ,	
Sagoo Placement Of Stent In Pulmonary Artery With Normal Anatomical Connections, On Dos Side Of Body \$630.5		, , ,	
Placement Of Stent In Pulmonary Arteries With Normal Anatomical Connections, On Both Sides Of Body \$603.93902 Placement Of Stent In Pulmonary Arteries With Abnormal Anatomical Connections, On De Side Of Body \$717.73904 \$608.9303 Placement Of Stent In Pulmonary Arteries With Abnormal Anatomical Connections, On Both Sides Of Body \$717.73904 \$717.73904 Placement Of Additional Stent In Pulmonary Artery Embolectomy; With Abnormal Anatomical Connections, On Both Sides Of Body \$240.73910 Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass \$2,279.93915 Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass \$3,510.0 \$1,98.6 \$3,916 Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass \$3,510.0 \$1,918.6 \$3,917 Repair Of Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass \$3,610.0 \$1,414.6 \$2,020 Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass \$3,610.0 \$1,414.6 \$2,020 Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass \$1,515.5 \$1,515.		· ·	
Placement Of Stent In Pulmonary Artery With Abnormal Anatomical Connections, On One Side Of Body \$608.9 \$39303 Placement Of Stent In Pulmonary Arteries With Abnormal Anatomical Connections, On Both Sides Of Body \$717.7 \$240.7 \$240.7 \$240.7 \$3930 Placement Of Additional Stent In Pulmonary Artery & \$240.7 \$240.7 \$3930 Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass \$2,279.9 \$39315 Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass \$3,610.0 \$3916 Pulmonary Endarterectomy With Or Without Embolectomy, With Cardiopulmonary Bypass \$3,610.0 \$3916 Pulmonary Artery Stenosis By Reconstruction With Patch Or Graft \$1,414.6 \$4,144.6			
33903 Placement Of Stent In Pulmonary Arteries With Abnormal Anatomical Connections, On Both Sides Of Body \$717.7		·	
Say Placement Of Additional Stent In Pulmonary Artery \$240.7			
33910 Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass 33918 Pulmonary Artery Embolectomy; Without Bypass 33916 Pulmonary Artery Embolectomy; Without Bypass 33916 Pulmonary Artery Embolectomy; Without Embolectomy, With Cardiopulmonary Bypass 33916 Pulmonary Artery Stenosis By Reconstruction With Patch Or Graft Repair Of Pulmonary Artery Stenosis By Reconstruction With Patch Or Graft Repair Of Pulmonary Artery Stenosis By Reconstruction With Patch Or Graft Repair Of Pulmonary Artery Stenosis By Reconstruction Or Replacement Of Conduit From Right Or Left Ventricle To 33020 Pulmonary Artery 33020 Pulmonary Artery With Cardiopulmonary Bypass Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List 33024 Separately In Addition To Code For Primary Procedure) \$272.4 33925 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass \$1,652.1 33926 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass \$2,303.4 33927 Implantation Of Artificial Heart \$2,190.8 33928 Removal Of Artificial Heart \$2,190.8 33929 Removal Of Artificial Heart \$2,190.8 33930 Without Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From 33931 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Price By Repo 33934 Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From 33944 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Price By Repo 33945 Heart Transplant, With Or Without Recipient Cardiectomy 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$300.2 33947 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$300.2 33949 Daily Management Of E			
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33916 Pulmonary Endarterectomy With Or Without Embolectomy, With Cardiopulmonary Bypass 33610.0 33917 Repair Of Pulmonary Artery Stenosis By Reconstruction With Patch Or Graft Repair Of Pulmonary Arteria With Ventricular Septal Defect, By Construction Or Replacement Of Conduit From Right Or Left Ventricle To 33920 Pulmonary Artery 33922 Transection Of Pulmonary Artery With Cardiopulmonary Bypass Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List 33924 Separately In Addition To Code For Primary Procedure) 33925 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass \$1,652.1 33926 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass \$1,652.1 33927 Implantation Of Artificial Heart \$2,190.8 33928 Replacement Of Artificial Heart \$2,190.8 33929 Removal Of Artificial Heart \$2,190.8 33929 Removal Of Artificial Heart \$2,190.8 33930 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Price By Repo 33930 Donor Cardiectomy (Including Cold Preservation) 33940 Donor Cardiectomy (Including Cold Preservation) 33940 Donor Cardiectomy (Including Cold Preservation) 33945 Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump 33948 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump 33949 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump 33949 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump 33940 Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump			
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S2,190.8	33924	Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure)	\$272.43
33928 Replacement Of Artificial Heart Price By Repo	3392 ⁴ 33925	Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass	\$272.43 \$1,652.15
33929 Removal Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From 33933 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation 33934 Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From 33944 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Price By Repo 33945 Heart Transplant, With Or Without Recipient Cardiectomy 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$300.2 33947 Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$33048 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$235.3 33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$227.7	33924 33925 33926	Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass	\$272.43 \$1,652.15 \$2,303.44
Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From 33933 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation 33935 Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy 33940 Donor Cardiectomy (Including Cold Preservation) Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From 33944 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Price By Repo 33945 Heart Transplant, With Or Without Recipient Cardiectomy 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$300.2 33947 Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$331.3 33948 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$225.3 33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$225.7 Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years	33924 33925 33926 33927	Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart	\$272.43 \$1,652.15 \$2,303.44 \$2,190.84
33933 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Price By Repo 33935 Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy \$4,270.6 33940 Donor Cardiectomy (Including Cold Preservation) Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From 33944 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Price By Repo 33945 Heart Transplant, With Or Without Recipient Cardiectomy 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$300.2 33947 Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$33948 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$225.3 33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$227.7 Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years	33924 33926 33926 33928	Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart	\$272.43 \$1,652.15 \$2,303.44 \$2,190.84 Price By Report
33935 Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy \$4,270.6	33924 33926 33926 33928	Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Removal Of Artificial Heart	\$272.43 \$1,652.15 \$2,303.44 \$2,190.84
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Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From 33944 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Price By Repo 33945 Heart Transplant, With Or Without Recipient Cardiectomy \$4,677.8 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$300.2 33947 Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$330.3 33948 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$235.3 33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$227.7 Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years	33924 33926 33927 33928 33928 33933	Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Removal Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation	\$272.43 \$1,652.15 \$2,303.44 \$2,190.84 Price By Report Price By Report
33944 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For \$\ \text{33945}\$ Heart Transplant, With Or Without Recipient Cardiectomy \$\ \text{4,677.8}\$ 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$\ \text{330.2}\$ 33947 Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$\ \text{331.3}\$ 33948 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$\ \text{235.3}\$ 33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$\ \text{227.7}\$ Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years	33924 33925 33926 33927 33928 33933 33935	Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Removal Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy	\$272.43 \$1,652.15 \$2,303.44 \$2,190.84 Price By Report Price By Report Price By Report \$4,270.68
33945 Heart Transplant, With Or Without Recipient Cardiectomy \$4,677.8	33924 33925 33926 33927 33928 33933 33935	Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Removal Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy Donor Cardiectomy (Including Cold Preservation)	\$272.43 \$1,652.15 \$2,303.44 \$2,190.84 Price By Report Price By Report
33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$300.2	33924 33925 33927 33928 33928 33933 33935 33940	Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Removal Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy Donor Cardiectomy (Including Cold Preservation) Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From	\$272.43 \$1,652.15 \$2,303.44 \$2,190.84 Price By Report Price By Report Price By Report \$4,270.68 Price By Report
33947 Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$331.3	33924 33925 33927 33928 33928 33933 33935 33940	Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Removal Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy Donor Cardiectomy (Including Cold Preservation) Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For	\$272.43 \$1,652.15 \$2,303.44 \$2,190.84 Price By Report Price By Report Price By Report \$4,270.68 Price By Report
33948 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$235.3 33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$227.7 Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years	33924 33925 33926 33927 33928 33935 33940 33944 33945	Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Removal Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy Donor Cardiectomy (Including Cold Preservation) Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Heart Transplant, With Or Without Recipient Cardiectomy	\$272.43 \$1,652.15 \$2,303.44 \$2,190.84 Price By Report Price By Report Price By Report \$4,270.68 Price By Report Price By Report
33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$227.7 Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years	33924 33925 33926 33927 33928 33935 33946 33946 33946 33946	Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Removal Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy Donor Cardiectomy (Including Cold Preservation) Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Heart Transplant, With Or Without Recipient Cardiectomy Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump	\$272.43 \$1,652.15 \$2,303.44 \$2,190.84 Price By Report Price By Report Price By Report \$4,270.68 Price By Report Price By Report \$4,677.89 \$300.28
Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years	33924 33925 33926 33927 33928 33935 33946 33946 33946 33946	Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Removal Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy Donor Cardiectomy (Including Cold Preservation) Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Heart Transplant, With Or Without Recipient Cardiectomy Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump	\$272.43 \$1,652.15 \$2,303.44 \$2,190.84 Price By Report Price By Report \$4,270.68 Price By Report Price By Report \$4,677.89 \$300.28 \$331.36
	33924 33925 33926 33927 33928 33935 33946 33946 33946 33947 33948	Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Removal Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy Donor Cardiectomy (Including Cold Preservation) Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Heart Transplant, With Or Without Recipient Cardiectomy Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump	\$272.43 \$1,652.15 \$2,303.44 \$2,190.84 Price By Report Price By Report Price By Report \$4,270.68 Price By Report Price By Report \$4,677.89 \$300.28 \$331.36
	33924 33925 33926 33927 33928 33935 33946 33946 33946 33947 33948	Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy Donor Cardiectomy (Including Cold Preservation) Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Heart Transplant, With Or Without Recipient Cardiectomy Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump	\$272.43 \$1,652.15 \$2,303.44 \$2,190.84 Price By Report Price By Report \$4,270.68 Price By Report Price By Report \$4,677.89 \$300.28

22252	Description	Fee
პპ952	Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And Older	\$430.15
22052	Innerties Of Tube Open Precedure For External Pland Circulation In Heart And Lunga Heing A Dump Patient Birth Through E Vegra Of Age	¢452.40
	Insertion Of Tube Open Procedure For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years Of Age Insertion Of Tube Open Procedure For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And Older	\$453.10 \$480.02
00001	Insertion Of Tube Accessed Through The Chest For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5	Ψ100.02
33955	Years Of Age	\$792.18
33956	Insertion Of Tube Accessed Through The Chest For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And Older	\$719.39
	Repositioning Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5	
33957	Years Of Age Repositioning Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And	\$159.19
33958		\$176.88
33959	Repositioning Of Tube Open Procedure For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years Of Age	\$201.81
	Repositioning Of Tube Open Procedure For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And Older	\$201.81
	Repositioning Of Tube Accessed Through The Chest For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5	*
33963	Years Of Age Repositioning Of Tube Accessed Through The Chest For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And	\$447.38
33964	Older	\$424.83
	Removal Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years	* 470.00
33965	Of Age	\$176.88
33966	Removal Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And Older	\$227.96
	Insertion Of Assistive Heart Blood Flow Device Into Aorta, Accessed Through The Skin	\$249.69
33968	Removal Of Blood Flow Assist Device In Aorta, Accessed Through The Skin	\$32.40
33969	Removal Of Tube Open Procedure For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years Of Age	\$260.89
	Removal Of Blood Flow Assist Device In Aorta, Open Procedure	\$306.57
	Removal Of Intra-Aortic Balloon Assist Device Including Repair Of Femoral Artery, With Or Without Graft	\$620.98
33973	Insertion Of Intra-Aortic Balloon Assist Device Through The Ascending Aorta	\$432.37
33974	Removal Of Intra-Aortic Balloon Assist Device From The Ascending Aorta, Including Repair Of The Ascending Aorta, With Or Without Graft	\$781.97
	Insertion Of External Lower Heart Chamber Blood Flow Assist Device	\$1,246.93
33976	Insertion Of External Blood Flow Assist Device In Both Lower Heart Chambers	\$1,364.09
	Removal Of External Assistive Blood Flow Device From One Lower Heart Chamber	\$970.67
	Removal Of External Assistive Blood Flow Device From Both Lower Heart Chambers Insertion Of Implanted Lower Heart Chamber Blood Flow Assist Device	\$1,277.10 \$1,672.56
	Removal Of Implanted Lower Heart Chamber Assistive Blood Flow Device	\$1,534.88
	Replacement Of External Lower Heart Chamber Assistive Blood Flow Device	\$794.01
	Replacement Of Implanted Lower Heart Chamber Assistive Blood Flow Devices	\$1,679.55
	Replacement Of Implanted Lower Heart Chamber Assistive Blood Flow Devices On Heart-Lung Machine Removed Of Type Open Procedure For External Blood Circulation In Heart And Lyngs Union A Rymp Potient 6 Years And Older	\$1,984.42
33984	Removal Of Tube Open Procedure For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And Older Removal Of Tube Accessed Through The Chest For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5	\$271.35
33985	Years Of Age	\$491.33
33986	Removal Of Tube Accessed Through The Chest For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And Older	\$451.25
	Incision Of Artery For Creation Of A Channel For Blood Circulation Using A Pump	
	Insertion Of Left Heart Vent Through Chest For Blood Oxygenation Rewarming And Return	\$179.53
00000		\$668.83
33989	Removal Of Left Heart Vent Through Chest For Blood Oxygenation Rewarming And Return Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And	
	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation	\$668.83
33990	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition	\$668.83 \$424.83 \$348.63
33990 33991	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation	\$668.83 \$424.83 \$348.63 \$411.32
33990 33991 33992	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition	\$668.83 \$424.83 \$348.63
33990 33991 33992 33993	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And	\$668.83 \$424.83 \$348.63 \$411.32 \$181.61 \$145.17
33990 33991 33992 33993 33995	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation	\$668.83 \$424.83 \$348.63 \$411.32 \$181.61 \$145.17
33990 33991 33992 33993 33995 33997	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin	\$668.83 \$424.83 \$348.63 \$411.32 \$181.61 \$145.17 \$316.22 \$140.78
33990 33991 33992 33993 33995 33997 33999	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation	\$668.83 \$424.83 \$348.63 \$411.32 \$181.61 \$145.17
33990 33991 33992 33993 33995 33997 33999 34001 34051	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision	\$668.83 \$424.83 \$348.63 \$411.32 \$181.61 \$145.17 \$316.22 \$140.78 Price By Report \$781.31 \$871.78
33990 33991 33992 33993 33995 33997 33999 34001 34051 34101	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision	\$668.83 \$424.83 \$348.63 \$411.32 \$181.61 \$145.17 \$316.22 \$140.78 Price By Report \$781.31 \$871.78 \$573.28
33990 33991 33992 33993 33995 33997 34001 34051 34101 34111	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Lower Arm Or Chest Via Arm Incision	\$668.83 \$424.83 \$348.63 \$411.32 \$181.61 \$145.17 \$316.22 \$140.78 Price By Report \$781.31 \$871.78 \$573.28
33990 33991 33992 33993 33995 33997 34001 34051 34101 34111 34151	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision	\$668.83 \$424.83 \$348.63 \$411.32 \$181.61 \$145.17 \$316.22 \$140.78 Price By Report \$781.31 \$871.78
33990 33991 33992 33993 33995 33997 34001 34051 34101 34111 34151 34201 34203	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot Tor Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot In Artery Via Abdominal Incision Removal Of Blood Clot In Artery Via Abdominal Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision	\$668.83 \$424.83 \$348.63 \$411.32 \$181.61 \$145.17 \$316.22 \$140.78 Price By Report \$781.31 \$871.78 \$573.28 \$576.79 \$1,198.58 \$797.39
33990 33991 33992 33993 33995 33997 34001 34051 34101 34151 34201 34203 34401	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot or Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot In Artery Via Abdominal Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Thrombectomy, Direct Or With Catheter; Vena Cava, Iliac Vein, By Abdominal Incision	\$668.83 \$424.83 \$348.63 \$411.32 \$181.61 \$145.17 \$316.22 \$140.78 Price By Report \$781.31 \$871.78 \$573.28 \$576.79 \$1,198.58 \$797.39 \$906.26 \$1,294.27
33990 33991 33992 33993 33995 33997 33999 34001 34051 34101 34111 34151 34201 34201 34201 34201 34201	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot To Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot In Artery Via Abdominal Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot In Vena Cava, Pelvic Or Thigh Artery Via Leg Incision	\$668.83 \$424.83 \$348.63 \$411.32 \$181.61 \$145.17 \$316.22 \$140.78 Price By Report \$781.31 \$871.78 \$573.28 \$576.79 \$1,198.58 \$797.39 \$906.26 \$1,294.27
33990 33991 33992 33993 33995 33997 34001 34101 34111 34151 34201 34203 34401 34421 34421	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Lower Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Aortoiliac Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Aortoiliac Artery Of Upper Leg Via Leg Incision Thrombectomy, Direct Or With Catheter; Vena Cava, Iliac Vein, By Abdominal Incision Removal Of Blood Clot In Vena Cava, Pelvic Or Thigh Artery Via Abdominal And Leg Incisions	\$668.83 \$424.83 \$348.63 \$411.32 \$181.61 \$145.17 \$316.22 \$140.78 Price By Report \$781.31 \$871.78 \$573.28 \$576.79 \$1,198.58 \$797.39 \$906.26 \$1,294.27 \$595.28
33990 33991 33992 33993 33995 33997 34001 34051 34101 34151 34201 34203 34401 34421 34451 34471	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot To Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot In Artery Via Abdominal Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot In Vena Cava, Pelvic Or Thigh Artery Via Leg Incision	\$668.83 \$424.83 \$348.63 \$411.32 \$181.61 \$145.17 \$316.22 \$140.78 Price By Report \$781.31 \$871.78 \$573.28 \$576.79 \$1,198.58 \$797.39 \$906.26 \$1,294.27
33990 33991 33992 33993 33995 33997 34001 34051 34101 34151 34201 34203 34401 34451 34471 34470 34490 34501	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Lower Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Aortoiliac Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Thrombectomy, Direct Or With Catheter; Vena Cava, Iliac Vein, By Abdominal Incision Removal Of Blood Clot In Vena Cava, Pelvic Or Thigh Artery Via Leg Incision Thrombectomy, Direct Or With Catheter; Subclavian Vein, By Neck Incision Thrombectomy, Direct Or With Catheter; Subclavian Vein, By Neck Incision Valvuloplasty, Femoral Vein	\$668.83 \$424.83 \$348.63 \$411.32 \$181.61 \$145.17 \$316.22 \$140.78 Price By Report \$781.31 \$871.78 \$573.28 \$576.79 \$11,198.58 \$797.39 \$906.26 \$1,294.27 \$595.28 \$1,223.76 \$921.96 \$568.39
33990 33991 33992 33993 33995 33997 34001 34051 34101 34151 34201 34203 34401 34421 34451 34470 34490 34502	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Lower Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Aortoliiac Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Thrombectomy, Direct Or With Catheter; Vena Cava, Iliac Vein, By Abdominal Incision Removal Of Blood Clot In Vena Cava, Pelvic Or Thigh Artery Via Abdominal And Leg Incisions Thrombectomy, Direct Or With Catheter; Subclavian Vein, By Neck Incision Thrombectomy, Direct Or With Catheter; Axillary And Subclavian Vein, By Arm Incision Reconstruction Of Vena Cava, Any Method	\$668.83 \$424.83 \$348.63 \$411.32 \$181.61 \$145.17 \$316.22 \$140.78 Price By Report \$781.31 \$871.78 \$573.28 \$576.79 \$1,198.58 \$797.39 \$906.26 \$1,294.27 \$595.28 \$1,223.76 \$956.83 \$767.03 \$1,345.70
33990 33991 33992 33993 33995 33999 34001 34101 34111 34151 34201 34401 34421 34451 34471 34471 344502 34502	Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Lower Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Aortoiliac Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Thrombectomy, Direct Or With Catheter; Vena Cava, Iliac Vein, By Abdominal Incision Removal Of Blood Clot In Vena Cava, Pelvic Or Thigh Artery Via Leg Incision Thrombectomy, Direct Or With Catheter; Subclavian Vein, By Neck Incision Thrombectomy, Direct Or With Catheter; Subclavian Vein, By Neck Incision Valvuloplasty, Femoral Vein	\$668.83 \$424.83 \$348.63 \$411.32 \$181.61 \$145.17 \$316.22 \$140.78 Price By Report \$781.31 \$871.78 \$573.28 \$576.79 \$11,198.58 \$797.39 \$906.26 \$1,294.27 \$595.28 \$1,223.76 \$921.96 \$568.39

Code	Description	Fee
	Placement Of Graft For Repair Of Aorta For Other Than Rupture Including Radiological Supervision And Interpretation	\$1,068.09
	Placement Of Graft For Repair Of Aorta For Rupture Including Radiological Supervision And Interpretation	\$1,584.22
34703	Placement Of Graft For Repair Of Infrarenal Aorta And Groin Artery Including Radiological Supervision And Interpretation	\$1,180.48
	Repair Of Non-Ruptured Aorta And Groin Artery On One Side With Graft Inserted Through Artery, Including Radiological Supervision And	
34704	Interpretation	\$1,951.64
0.4705	Repair Of Non-Ruptured Aorta And Groin Arteries On Both Sides With Graft Inserted Through Artery, Including Radiological Supervision And	0.4.5.40.7.4
34705	Interpretation Repair Of Ruptured Aorta And Groin Arteries On Both Sides With Graft Inserted Through Artery, Including Radiological Supervision And	\$1,513.71
34706	Interpretation	\$1,950.62
34700	morpotation	ψ1,930.02
34707	Repair Of Non-Ruptured Groin Artery On One Side With Graft Inserted Through Artery, Including Radiological Supervision And Interpretation	\$995.87
	Repair Of Non-Ruptured Groin Arteries On Both Sides With Graft Inserted Through Artery, Including Radiological Supervision And Interpretation	\$1,586.97
	Insertion Of Prosthesis For Repair Of Abdominal Or Groin Artery Including Radiological Supervision And Interpretation	\$275.29
	Delayed Insertion Of Prosthesis For Repair Of Abdominal Or Groin Artery, Initial Vessel Treated	\$685.09
	Delayed Insertion Of Prosthesis For Repair Of Abdominal Or Groin Artery, Additional Vessel Treated Delivery Of Fixation Device To Graft Via Catheter Including Radiological Supervision And Interpretation	\$251.36
	Exposure Of One Groin Artery For Delivery Of Graft, Accessed Through The Skin	\$566.59 \$116.94
	Exposure Of One Groin Artery With Creation Of Conduit, Open Procedure	\$230.79
	Exposure Of One Underarm Or Upper Chest Artery For Delivery Of Prosthesis, Open Procedure	\$255.09
	Exposure Of One Underarm Or Upper Chest Artery With Creation Of Conduit	\$319.27
34717	Repair Of Groin Artery On One Side With Graft Inserted Through Artery, Performed At Same Time As Repair Of Aorta	\$379.46
34718	Repair Of Groin Artery On One Side With Graft Inserted Through Artery, Not Performed At Same Time As Repair Of Aorta	\$1,061.15
	Endovascular Placement Of Iliac Artery Occlusion Device (List Separately In Addition To Code For Primary Procedure)	\$168.22
34812	Exposure Of One Thigh Artery For Insertion Of Prosthesis, Open Procedure	\$175.84
	Placement Of Femoral-Femoral Prosthetic Graft During Endovascular Aortic Aneurysm Repair (List Separately In Addition To Code For Primary	
	Procedure)	\$200.77
	Exposure Of One Groin Artery For Insertion Of Prosthesis, Open Procedure Repair Of Bulging (Aneurysm) Of Aorta With Prosthesis, Open Procedure	\$285.18 \$1,499.86
	Repair Of Bulging (Aneurysm) Of Aorta Or Groin Arteries With Prosthesis, Open Procedure	\$1,643.38
	Repair Of Bulging (Aneurysm) Of Aorta Or Upper Thigh Arteries With Prosthesis, Open Procedure	\$1,612.02
	Exposure Of One Groin Artery With Creation Of Conduit	\$332.41
	Exposure Of One Arm Artery For Insertion Of Prosthesis, Open Procedure	\$109.74
	Repair Of Aorta In Abdomen With Graft, Including 1 Graft In Artery To Abdominal Organs, Inserted Through Artery, Including Radiological	
34841	Supervision And Interpretation	\$1,129.86
	Repair Of Aorta In Abdomen Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including	
34842	Radiological Supervision And Interpretation	\$1,275.68
3/8/3	Repair Of Aorta In Abdomen Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Radiological Supervision And Interpretation	\$1,441.97
34043	Repair Of Aorta In Abdomen Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Artery,	Ψ1,441.31
34844	Including Radiological Supervision And Interpretation	\$1,539.97
	Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 1 Graft In Artery To Abdominal Organs, Inserted Through	
	Artery, Including Radiological Supervision And Interpretation	\$1,322.59
	Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through	
34846	Artery, Including Radiological Supervision And Interpretation	\$1,470.61
2/0/7	Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Radiological Supervision And Interpretation	\$1,494.39
34047	Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted	\$1,494.39
34848	Through Artery, Including Radiological Supervision And Interpretation	\$1,539.14
	Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm	Ţ.,500.111
	And Associated Occlusive Disease, Carotid, Subclavian Artery, By Neck Incision	\$971.92
	Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Carotid,	
35002	Subclavian Artery, By Neck Incision	\$972.33
25005	Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm,	#050 70
35005	Pseudoaneurysm, And Associated Occlusive Disease, Vertebral Artery Direct Repair Of Aneurysm, False Aneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And	\$852.76
35011	Associated Occlusive Disease, Axillary-Brachial Artery, By Arm Incision	\$871.31
20011	Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Axillary-	ψ3, 1.01
35013	Brachial Artery, By Arm Incision	\$1,088.65
	Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm,	
35021	Pseudoaneurysm, And Associated Occlusive Disease, Innominate, Subclavian Artery, By Thoracic Incision	\$1,101.46
05	Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Innominate,	A
35022	Subclavian Artery, By Thoracic Incision	\$1,258.37
3504F	Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Radial Or Ulnar Artery	\$965.31
33043	Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm,	ψ900.51
35081	Pseudoaneurysm, And Associated Occlusive Disease, Abdominal Aorta	\$1,480.89
	Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Abdominal	. ,
35082	Aorta	\$1,856.60
	Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving	
	Arteries To Abdominal Organs	\$1,527.32
35092	Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Arteries To Abdominal Organs Pirect Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Arteries To Abdominal Organs	\$2,227.58
35102	Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries	\$1 604 F2
	Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries	\$1,604.53 \$1,894.49
	Direct Repair Or Excision Of Replaced Bulging (Ariedryshi) of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery	\$1,132.82
	Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Spleen Artery	\$1,391.10
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Code	Description	Fee
35121	Direct Repair Of Bulging (Aneurysm) Of Artery To Liver, Kidneys, Stomach, And/Or Intestines (Hepatic, Celiac, Renal, Or Mesenteric Artery)	\$1,345.75
35122	Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Artery To Liver, Kidneys, Stomach, And/Or Intestines (Hepatic, Celiac, Renal, Or Mesenteric Artery)	\$1,608.09
35131	Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Iliac Artery (Common, Hypogastric, External)	\$1,171.62
35132	Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Iliac Artery (Common, Hypogastric, External)	\$1,391.10
35141	Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Common Femoral Artery (Profunda Femoris, Superficial Femoral)	\$941.65
	Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Common Femoral Artery (Profunda Femoris, Superficial Femoral)	\$1,135.93
	Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Popliteal Artery	\$1,060.14
35152	Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Popliteal	\$1,191.39
35180	Repair, Congenital Arteriovenous Fistula; Head And Neck	\$672.42
	Repair, Congenital Arteriovenous Fistula; Thorax And Abdomen Repair, Congenital Arteriovenous Fistula; Extremities	\$1,560.12 \$824.58
	Repair, Acquired Or Traumatic Arteriovenous Fistula; Head And Neck	\$1,098.85
	Repair, Acquired Or Traumatic Arteriovenous Fistula; Thorax And Abdomen	\$1,285.62
	Repair, Acquired Or Traumatic Arteriovenous Fistula; Extremities	\$666.76
	Repair Blood Vessels Or A-V Fistula, Direct; Neck Repair Blood Vessels Or A-V Fistula, Direct; Upper Extremity	\$816.01 \$760.33
	Repair Blood Vessels Or A-V Fistula, Direct; Hand, Finger	\$687.35
	Repair Blood Vessels Or A-V Fistula, Direct; Intrathoracic, With Bypass	\$1,218.69
	Repair Blood Vessels Or A-V Fistula, Direct; Intrathoracic, Without Bypass	\$1,826.54
	Repair Blood Vessels Or A-V Fistula, Direct; Intra-Abdominal	\$1,425.18
	Repair Blood Vessels Or A-V Fistula, Direct; Lower Extremity Repair Blood Vessel Or A-V Fistula With Vein Graft; Neck	\$800.29 \$1,113.66
	Repair Blood Vessel Or A-V Fistula With Vein Graft; Neck Repair Blood Vessel Or A-V Fistula With Vein Graft; Upper Extremity	\$1,113.66
	Repair Blood Vessel Or A-V Fistula With Vein Graft; Intrathoracic, With Bypass	\$1,253.02
35246	Repair Blood Vessel Or A-V Fistula With Vein Graft; Intrathoracic, Without Bypass	\$1,361.42
	Repair Blood Vessel Or A-V Fistula With Vein Graft; Intra-Abdominal	\$1,503.55
	Repair Blood Vessel Or A-V Fistula With Vein Graft; Lower Extremity	\$1,018.40
	Repair Blood Vessel Or A-V Fistula With Graft Other Than Vein; Neck Repair Blood Vessel Or A-V Fistula With Graft Other Than Vein; Upper Extremity	\$838.12 \$830.74
	Repair Blood Vessel Or A-V Fistula With Graft Other Than Vein; Intrathoracic, With Bypass	\$1,205.40
35276	Repair Blood Vessel Or A-V Fistula With Graft Other Than Vein; Intrathoracic, Without Bypass	\$1,201.75
	Repair Blood Vessel Or A-V Fistula With Graft Other Than Vein; Intra-Abdominal	\$1,401.30
	Repair Blood Vessel Or A-V Fistula With Graft Other Than Vein; Lower Extremity	\$895.49
	Removal Of Blood Clot And Portion Of Artery, By Neck Incision Removal Of Blood Clot And Portion Of Artery, Superficial Femoral Artery	\$1,079.03 \$1.069.47
	Removal Of Blood Clot And Portion Of Artery, Popliteal Artery	\$1,058.36
	Removal Of Blood Clot And Portion Of Artery, Tibioperoneal Trunk Artery	\$1,091.62
	Removal Of Blood Clot And Portion Of Artery, Tibial Or Peroneal Artery, Initial Vessel	\$1,051.82
	Removal Of Blood Clot And Portion Of Artery, Tibial Or Peroneal Artery, Each Additional Artery Removal Of Blood Clot And Portion Of Artery, By Thoracic Incision	\$376.79
	Thromboendarterectomy. With Or Without Patch Graft: Axillary-Brachial	\$1,351.88 \$768.95
0002.	Thromboendarterectomy, With Or Without Patch Graft: Abdominal Aorta	\$1,244.36
35341	Thromboendarterectomy, With Or Without Patch Graft; Mesenteric, Celiac, Or Renal	\$1,191.07
	Thromboendarterectomy, With Or Without Patch Graft; Iliac	\$1,104.38
	Removal Of Blood Clot And Portion Of Artery Of Upper Thigh, Iliofemoral Thromboondarters of the Or Without Batch Graft: Combined Actollics	\$979.66
	Thromboendarterectomy, With Or Without Patch Graft; Combined Aortoiliac Thromboendarterectomy, With Or Without Patch Graft; Combined Aortoiliofemoral	\$1,296.33 \$1,382.59
	Removal Of Blood Clot And Portion Of Artery Of Upper Thigh Artery, Common	\$779.24
35372	Removal Of Blood Clot And Portion Of Artery Of Upper Thigh Artery, Deep	\$835.76
	Reoperation, Carotid, Thromboendarterectomy, More Than One Month After Original Operation (List Separately In Addition To Code For Primary Procedure)	\$135.29
35400	Examination Of Blood Vessel Or Graft Using An Endoscope Harvest Of Upper Extremity Vein, One Segment, For Lower Extremity Or Coronary Artery Bypass Procedure (List Separately In Addition To	\$125.59
35500	Code For Primary Procedure)	\$270.51
	Bypass Of Diseased Or Blocked Artery (Neck To Brain Artery), With Vein	\$1,242.03
	Bypass Of Diseased Or Blocked Artery (Neck To Chest Artery), With Vein	\$1,084.97
	Bypass Of Diseased Or Blocked Artery (Back Of Neck To Brain Artery), With Vein	\$1,132.14
	Bypass Of Diseased Or Blocked Artery (Neck To Opposite Neck Artery), With Vein Bypass Of Diseased Or Blocked Artery (Neck To Arm Artery), With Vein	\$1,202.36 \$1,047.36
	Bypass Of Diseased Or Blocked Artery (Neck To Arthr Artery), With Vein	\$954.68
35512	Bypass Of Diseased Or Blocked Artery (Chest To Arm Artery), With Vein	\$1,026.81
	Bypass Of Diseased Or Blocked Artery (Chest To Brain Artery), With Vein	\$1,132.14
	Bypass Of Diseased Or Blocked Artery (Chest To Upper Arm Artery), With Vein	\$1,039.27
	Bypass Of Diseased Or Blocked Artery (Under Arm To Opposite Arm Artery), With Vein Bypass Of Diseased Or Blocked Artery (Arm To Upper Leg Artery), With Vein	\$972.93 \$1,047.88
	Bypass Of Diseased Or Blocked Artery (Arm 10 Opper Leg Artery), With Vein	\$996.87
	Bypass Of Diseased Or Blocked Artery (Upper Arm To Arm Artery), With Vein	\$1,226.37
05505	Bypass Of Diseased Or Blocked Artery (Upper Arm To Opposite Arm Artery), With Vein	\$971.94

Codo	Personinting	Foo
	Description Bypass Of Diseased Or Blocked Artery (Chest To Neck Artery), With Vein	Fee \$1,504.48
	Bypass Of Diseased Or Blocked Artery (Criest To Neck Artery), With Vein	\$1,658.15
	Bypass Of Diseased Or Blocked Artery (Arm To Upper Leg And Opposite Leg Artery), With Vein	\$1,283.66
	Bypass Of Diseased Or Blocked Artery (Liver To Kidney Artery), With Vein	\$1,618.58
	Bypass Of Diseased Or Blocked Artery (Spleen To Kidney Artery), With Vein	\$1,438.77
35537	Bypass Of Diseased Or Blocked Artery (Aorta To Groin Artery), With Vein	\$1,771.72
35538	Bypass Of Diseased Or Blocked Artery (Aorta To Groin And Opposite Groin Artery), With Vein	\$1,984.74
35539	Bypass Of Diseased Or Blocked Artery (Aorta To Upper Leg Artery), With Vein	\$1,862.77
35540	Bypass Of Diseased Or Blocked Artery (Aorta To Upper Leg And Opposite Upper Leg Artery), With Vein	\$2,075.17
	Bypass Of Diseased Or Blocked Artery (Upper To Lower Leg Artery), With Vein	\$1,197.82
	Bypass Of Diseased Or Blocked Artery (Upper Leg To Opposite Upper Leg Artery), With Vein	\$1,058.64
	Bypass Of Diseased Or Blocked Artery (Aorta To Kidney Artery), With Vein	\$1,451.12
	Bypass Of Diseased Or Blocked Artery (Groin To Opposite Groin Artery), With Vein	\$1,128.66
	Bypass Of Diseased Or Blocked Artery (Groin To Upper Leg Artery), With Vein	\$1,248.46
	Bypass Of Diseased Or Blocked Artery (Upper Leg To Lower Leg Artery), With Vein	\$1,583.90
	Bypass Of Diseased Or Blocked Artery (Lower Leg To Opposite Lower Leg Artery), With Vein	\$1,255.78
	Bypass Of Diseased Or Blocked Artery (Lower Leg To Lower Leg Artery), With Vein Harvest Of Vein Segment (Upper Leg To Thigh), One Segment	\$1,135.11
35572	naivest of vein Segment (Opper Leg 10 Triigh), one Segment	\$293.76
35583	Bypass Of Diseased Or Blocked Artery By Insertion Of Vein Graft From Artery Of Thigh To Artery Of Knee (Femoral-Popliteal Bypass)	\$1,232.39
00000	Bypass of Diseased Or Blocked Artery By Insertion Of Vein Graft From Artery Of Thigh To Artery Of Lower Leg (Femoral-Anterior Tibial,	Ψ1,202.00
35585	Posterior Tibial, Or Peroneal Artery Bypass)	\$1,428.36
	Bypass Of Diseased Or Blocked Artery By Insertion Of Vein Graft From Artery Of Knee To Artery Of Lower Leg (Popliteal-Tibial Or Peroneal	,,,==100
35587	Artery Bypass)	\$1,157.56
	Harvest Of An Arm Artery Segment, One Segment	\$178.35
35601	Bypass Of Diseased Or Blocked Artery (Neck To Brain Artery), Other Than Vein	\$1,199.64
	Bypass Of Diseased Or Blocked Artery (Neck To Chest Artery), Other Than Vein	\$1,005.34
	Bypass Of Diseased Or Blocked Artery (Chest To Opposite Chest Artery), Other Than Vein	\$893.20
	Bypass Of Diseased Or Blocked Artery (Chest To Upper Arm Artery), Other Than Vein	\$938.71
	Bypass Of Diseased Or Blocked Artery (Arm To Chest Artery), Other Than Vein	\$1,045.68
	Bypass Of Diseased Or Blocked Artery (Arm To Lower Leg Artery), Other Than Vein	\$1,120.79
	Bypass Of Diseased Or Blocked Artery (Arm To Lower Thigh Or Leg Artery), Other Than Vein	\$1,384.69
	Bypass Of Diseased Or Blocked Artery (Aorta To Abdominal Or Kidney Artery), Other Than Vein	\$1,578.85
	Bypass Of Diseased Or Blocked Artery (Groin To Stomach Artery, Eg Ilio-Celiac), Other Than Vein	\$1,537.15
	Bypass Of Diseased Or Blocked Artery (Groin To Abdominal Artery), Other Than Vein	\$1,690.49
	Bypass Of Diseased Or Blocked Artery (Groin To Stomach Artery, Eg Iliorenal), Other Than Vein Bypass Of Diseased Or Blocked Artery (Spleen To Kidney Artery), Other Than Vein	\$1,504.46
	Bypass Of Diseased Or Blocked Artery (Aprile 11 or Kidney Artery), Other Than Vein	\$1,358.00 \$1,411.87
	Bypass Of Diseased Or Blocked Artery (Aorta To Groin To Opposite Groin Artery), Other Than Vein	\$1,485.04
	Bypass Of Diseased Or Blocked Artery (Rack Of Neck To Brain Artery), Other Than Vein	\$845.96
	Bypass of Diseased Or Blocked Artery (Chest To Arm Artery), Other Than Vein	\$809.92
	Bypass of Diseased Or Blocked Artery (Aorta To Upper Leg And Opposite Upper Leg Artery), Other Than Vein	\$1,461.54
	Bypass Of Diseased Or Blocked Artery (Aorta To Upper Leg Artery), Other Than Vein	\$1,328.07
	Bypass Of Diseased Or Blocked Artery (Under Arm To Opposite Arm Artery), Other Than Vein	\$871.50
	Bypass Of Diseased Or Blocked Artery (Arm To Both Lower Thigh Arteries), Other Than Vein	\$1,300.20
	Bypass Of Diseased Or Blocked Artery (Upper Leg To Lower Thigh Artery), Other Than Vein	\$1,026.35
35661	Bypass Of Diseased Or Blocked Artery (Upper Leg To Opposite Upper Leg Artery), Other Than Vein	\$1,035.78
35663	Bypass Of Diseased Or Blocked Artery (Groin To Opposite Groin Artery), Other Than Vein	\$1,039.68
	Bypass On Diseased Or Blocked Groin To Upper Leg Artery, Other Than Vein	\$1,006.64
	Bypass Of Diseased Or Blocked Artery (Upper Leg To Lower Leg Arteries), Other Than Vein	\$1,112.13
	Bypass Of Diseased Or Blocked Artery (Knee To Lower Leg Arteries), Other Than Vein	\$980.89
	Bypass Of Diseased Or Blocked Artery, Composite	\$67.87
	Bypass Of Diseased Or Blocked Artery, Composite, 2 Veins	\$300.13
35683	Bypass Of Diseased Or Blocked Artery, Composite, 3 Or More Veins	\$346.08
3560F	Placement Of Vein Patch Or Cuff At Distal Anastomosis Of Bypass Graft, Synthetic Conduit (List Separately In Addition To Code For Primary Procedure)	\$167.99
33005	Creation Of Distal Arteriovenous Fistula During Lower Extremity Bypass Surgery (Non-Hemodialysis) (List Separately In Addition To Code For	φισι.99
35686	Primary Procedure)	\$136.21
	Transposition And/Or Reimplantation; Vertebral To Carotid Artery	\$809.27
	Transposition And/Or Reimplantation; Vertebral To Subclavian Artery	\$717.30
	Transposition And/Or Reimplantation; Subclavian To Carotid Artery	\$938.43
	Transposition And/Or Reimplantation; Carotid To Subclavian Artery	\$876.38
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35697	Reimplantation, Visceral Artery To Infrarenal Aortic Prosthesis, Each Artery (List Separately In Addition To Code For Primary Procedure)	\$124.70
	Reoperation, Femoral-Popliteal Or Femoral (Popliteal) -Anterior Tibial, Posterior Tibial, Peroneal Artery Or Other Distal Vessels, More Than One	
	Month After Original Operation (List Separately In Addition To Code For Primary Procedure)	\$143.30
	Exploration Of Artery Of Neck	\$393.67
	Exploration Of Artery Of Arm	\$356.33
	Exploration Of Artery Of Leg	\$408.45
	Exploration Of Neck For Postsurgical Bleeding, Blood Clot, Or Infection	\$484.45
	Exploration Of Chest For Postsurgical Bleeding, Blood Clot, Or Infection	\$1,280.59
	Exploration Of Abdomen For Postsurgical Bleeding, Blood Clot, Or Infection Exploration Of Arm Or Leg For Postsurgical Bleeding, Blood Clot, Or Infection	\$793.23
	Exploration Of Arm Or Leg For Postsurgical Bleeding, Blood Clot, Or Infection	\$680.68
	Repair Of Graft-Enteric Fistula Thrombectomy Of Arterial Or Venous Graft (Other Than Hemodialysis Graft Or Fistula);	\$1,065.26 \$570.59
	Thrombectomy Of Arterial Or Venous Graft (Other Than Hernodialysis Graft Or Fistula), Thrombectomy Of Arterial Or Venous Graft; With Revision Of Arterial Or Venous Graft	\$812.86
	Revision Of Arterial Bypass Of Leg With Placement Of Vein Patch, Open Procedure	\$792.57
55019	Transist of Automat Bypaso of Log Will Flacomont of Voll Flaton, Opon Floodule	Ψ132.31

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	Description Revision Of Arterial Bypass Of Leg With Placement Of Relocated Vein, Open Procedure	Fee \$876.96
	Revision of Arterial Bypass of Groin With Placement Synthetic Graft, Open Procedure	\$1,029.44
	Revision Of Arterial Bypass Of Groin With Vein Patch Graft, Open Procedure	\$1,055.57
	Excision of Infected Graft; Neck	\$412.56
	Excision Of Infected Graft: Extremity	\$495.09
	Excision of Infected Graft; Thorax	\$1,430.58
	Excision Of Infected Graft: Abdomen	\$1,630.65
	Introduction of Needle Or Intracatheter, Vein	\$0.01
	Injection To Cause Blood Clot In A Diseased Or Bulging Vessel Of Arm Or Leg, Accessed Through The Skin	\$155.18
	Injection Procedure For Extremity Venography (Including Introduction Of Needle Or Intracatheter)	\$285.19
	Introduction Of Catheter, Superior Or Inferior Vena Cava	\$604.47
	Insertion Of Catheter Into Vein, First Order Branch	\$597.41
	Insertion Of Catheter Into Vein, Second Order Branch	\$610.53
	Introduction Of Catheter, Right Heart Or Main Pulmonary Artery	\$783.37
	Selective Catheter Placement, Left Or Right Pulmonary Artery	\$580.27
	Selective Catheter Placement, Each Segmental Or Subsegmental Pulmonary Artery	\$773.33
	Introduction of Needle or Intracatheter, Carotid or Vertebral Artery	\$533.17
	Insertion Of Needle Or Catheter Into An Artery Of Arm Or Leg	\$375.60
	Introduction of Needle Or Intracatheter, Aortic, Translumbar	\$555.89
	Introduction Of Catheter, Aorta	\$532.04
	Insertion Of Catheter Into Chest Or Arm Artery, Each First Order Branch	\$757.06
	Insertion Of Catheter Into Chest Or Arm Artery, Initial Second Order Branch	\$772.22
	Insertion Of Catheter Into Chest Or Arm Artery, Initial Third Order Branch	\$1,284.65
	Insertion of Catheter Into Chest Or Arm Artery, Initial Thild Order Branch Insertion Of Catheter Into Chest Or Arm Artery, Additional Second, Third Order And Beyond	\$1,284.63
30210	Non-Selective Catheter Placement, Thoracic Aorta, With Angiography Of The Extracranial Carotid, Vertebral, And/Or Intracranial Vessels,	ψ157.01
36221	Unilateral Or Bilateral, And All Associated Radiological Supervision And Interpretation, Includes Angiography Of The	\$1,094.42
33221	Insertion Of Catheter Into Extracranial Artery On One Side Of Neck For Diagnosis Or Treatment Including Radiological Supervision And	ψ1,001.72
36222	Interpretation	\$1,185.06
	Insertion Of Catheter Into Intracranial Artery On One Side Of Neck For Diagnosis Or Treatment Including Radiological Supervision And	\$1,100100
36223	Interpretation	\$1,748.13
	Insertion Of Catheter Into Internal Carotid Artery On One Side Of Neck For Diagnosis Or Treatment Including Radiological Supervision And	\$1,110.10
36224	Interpretation	\$2,028.06
	Coloring Catholica Discourage Catholica Octooring to Annu. United and With Americanship Of The Indiatoral Vertained Circulation And All	
20225	Selective Catheter Placement, Subclavian Or Innominate Artery, Unilateral, With Angiography Of The Ipsilateral Vertebral Circulation And All	¢4.050.05
	Associated Radiological Supervision And Interpretation, Includes Angiography Of The Cervicocerebral Arch, When P Radiological Supervision And Interpretation, Includes Angiography Of The Cervicocerebral Arch, When Performed	\$1,656.95
30220	Insertion Of Catheter Into External Carotid Artery On One Side Of Neck For Diagnosis Or Treatment Including Radiological Supervision And	\$2,068.11
26227	Interpretation	\$242.89
30227	merpretation	φ242.09
	Selective Catheter Placement, Each Intracranial Branch Of The Internal Carotid Or Vertebral Arteries, Unilateral, With Angiography Of The	
	Selected Vessel Circulation And All Associated Radiological Supervision And Interpretation (Eg, Middle Cerebral Artery, Post	\$1,419.21
	Insertion Of Catheter Into Abdominal Pelvic Or Leg Artery, Each First Order Branch	\$909.74
	Insertion Of Catheter Into Abdominal Pelvic Or Leg Artery, Initial Second Order Branch	\$602.44
	Insertion Of Catheter Into Abdominal Pelvic Or Leg Artery, Initial Third Order Branch	\$1,577.88
36248		\$83.41
	Selective Insertion Of Catheters Into Main And Accessory Arteries Of One Kidney For Imaging Including Radiological Supervision And	
36251	Interpretation	\$1,427.62
	Colorio Colorio Diagnos (For Color) Mr. Donal Astrono Andrea Andrea (O) For Donal Astronomy	
20252	Selective Catheter Placement (First-Order), Main Renal Artery And Any Accessory Renal Artery(S) For Renal Angiography, Including Arterial	
36252	Puncture And Catheter Placement(S), Fluoroscopy, Contrast Injection(S), Image Postprocessing, Permanent Recording Of Image Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of One Kidney For Imaging Including Radiological	Ø4 500 00
36353	A SUBJECTIVE INSERTION FOR CONTRACTOR SECONDS FOR ENGINEERING BRANCINGS FOR ARREST FOR IMPAINATIONAL PROBLEMS IN A SOCIETA FOR ENGINEERING PROBLEM	\$1,526.63
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30233	Supervision And Interpretation	
	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological	\$2,243.96
36254	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation	\$2,243.96 \$1,981.42
36254 36260	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver)	\$2,243.96 \$1,981.42 \$587.59
36254 36260 36261	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump	\$2,243.96 \$1,981.42 \$587.59 \$371.82
36254 36260 36261 36262	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54
36254 36260 36261 36262 36299	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report
36254 36260 36261 36262 36299 36400	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49
36254 36260 36261 36262 36299 36400 36405	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49
36254 36260 36261 36262 36299 36400 36405 36406	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$24.96 \$18.29
36254 36260 36261 36262 36299 36400 36405 36406	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$24.96 \$18.29 \$18.42
36254 36260 36261 36262 36299 36400 36405 36406 36410 36415	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$24.96 \$18.29 \$18.42 \$8.83
36254 36260 36261 36262 36299 36400 36405 36406 36410 36415 36416	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$24.96 \$18.29 \$18.42 \$8.83
36254 36260 36261 36262 36299 36400 36405 36406 36410 36415 36416 36420	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year)	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$24.96 \$18.29 \$18.42 \$8.83 \$4.66
36254 36260 36261 36262 36299 36400 36405 36405 36416 36416 36416 36420 36425	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older)	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$24.96 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97
36254 36260 36261 36262 36299 36400 36405 36406 36416 36416 36420 36425 36430	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97
36254 36260 36261 36262 36293 36400 36405 36406 36415 36416 36420 36420 36430 36430	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implantable Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger)	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97 \$36.46
36254 36260 36261 36262 36293 36400 36405 36416 36416 36420 36425 36430 36440 36450	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Newborn	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97 \$36.46 \$40.97
36254 36260 36261 36262 36299 36400 36405 36410 36415 36416 36420 36425 36430 36450	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Newborn Exchange Blood Transfusion, Other Than Newborn	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$18.29 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97 \$36.46 \$40.58 \$47.02 \$159.53
36254 36260 36261 36262 36299 36400 36405 36416 36415 36416 36420 36425 36430 36450 36455	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Other Than Newborn Partial Exchange Transfusion, Newborn	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$24.96 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97 \$36.46 \$40.58 \$47.02 \$159.53 \$108.51
36254 36260 36261 36262 36299 36400 36405 36416 36415 36416 36420 36425 36430 36440 36450 36456 36456 36456	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implantable Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Newborn Exchange Blood Transfusion, Other Than Newborn Partial Exchange Transfusion, Newborn Intrauterine Fetal Transfusion	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$24.96 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97 \$36.46 \$40.58 \$47.02 \$159.53 \$198.51
36254 36260 36261 36262 36299 36400 36405 36416 36416 36425 36430 36455 36456 36460 36465	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Newborn Exchange Blood Transfusion, Other Than Newborn Partial Exchange Transfusion, Newborn Intrauterine Fetal Transfusion Injection Of Chemical Agent Into Single Incompetent Vein Of Leg Using Ultrasound Guidance	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$24.96 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97 \$36.46 \$47.02 \$159.53 \$108.51 \$90.96 \$308.76
36254 36260 36261 36262 36299 36400 36405 36410 36415 36416 36450 36450 36450 36456 36460 36466	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Newborn Exchange Blood Transfusion, Other Than Newborn Partial Exchange Transfusion, Other Than Newborn Infrauterine Fetal Transfusion Injection Of Chemical Agent Into Single Incompetent Vein Of Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Multiple Incompetent Vein Of Same Leg Using Ultrasound Guidance	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$24.96 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97 \$36.46 \$40.58 \$47.02 \$159.53 \$108.51 \$90.96 \$308.76 \$1,468.70 \$1,459.34
36254 36260 36261 36262 36299 36400 36405 36410 36415 36416 36420 36450 36455 36456 36466 36466	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Removal Of Implantable Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 1 Years Insertion Of Needle Into Vein, Patient Younger Than 1 Years Insertion Of Needle Into Vein, Patient Younger Than 1 Year) Incision Of Vein For Insertion Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Newborn Exchange Blood Transfusion, Newborn Intrauterine Fetal Transfusion Ingection Of Chemical Agent Into Single Incompetent Vein Of Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Multiple Incompetent Veins Of Same Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Spider Veins Of Arm, Leg, Or Trunk	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97 \$36.46 \$40.58 \$47.02 \$159.53 \$108.51 \$990.96 \$308.76 \$1,459.34 Price By Report
36254 36260 36261 36262 36293 36400 36405 36416 36416 36420 36455 36455 36456 36456 36466 36468	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implantable Intra-Arterial Infusion Pump Removal Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Slood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Newborn Exchange Blood Transfusion, Other Than Newborn Partial Exchange Transfusion, Other Than Newborn Intrauterine Fetal Transfusion Injection Of Chemical Agent Into Single Incompetent Vein Of Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Spider Veins Of Same Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Spider Veins Of Same Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Spider Veins Of Same Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Single Incompetent Vein Of Same Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Single Incompetent Vein Of Same Leg Using Ultrasound Guidance	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97 \$36.46 \$40.58 \$47.02 \$159.53 \$108.51 \$90.96 \$308.76 \$1,468.70 \$1,459.34 Price By Report
36254 36260 36261 36262 36293 36400 36405 36416 36415 36420 36455 36456 36456 36466 36466 36468 36460 36466 36468 36470 36471	Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Removal Of Implantable Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 1 Years Insertion Of Needle Into Vein, Patient Younger Than 1 Years Insertion Of Needle Into Vein, Patient Younger Than 1 Year) Incision Of Vein For Insertion Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Newborn Exchange Blood Transfusion, Newborn Intrauterine Fetal Transfusion Ingection Of Chemical Agent Into Single Incompetent Vein Of Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Multiple Incompetent Veins Of Same Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Spider Veins Of Arm, Leg, Or Trunk	\$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97 \$36.46 \$40.58 \$47.02 \$159.53 \$108.51 \$90.96 \$308.76 \$1,459.34 Price By Report

Code	Description	Fee
26474	Mechanochemical Destruction Of Insufficient Vein Of Arm Or Leg, Accessed Through The Skin Using Imaging Guidance, Subsequent Vein(S)	\$249.46
	Destruction Of Insufficient Vein Of Arm Or Leg, Accessed Through The Skin Destruction Of Insufficient Vein Of Arm Or Leg, Accessed Through The Skin	\$1,186.57
	Radiofrequency Destruction Of Insufficient Vein Of Arm Or Leg, Accessed Through The Skin Using Imaging Guidance	\$302.24
	Laser Destruction Of Incompetent Vein Of Arm Or Leg Using Imaging Guidance, Accessed Through The Skin	\$1,081.16
36479	Laser Destruction Of Insufficient Vein Of Arm Or Leg, Accessed Through The Skin Using Imaging Guidance	\$286.18
36481	Insertion Of Catheter Into Portal Vein Of Liver, Accessed Through The Skin	\$1,277.34
	Chemical Destruction Of Incompetent Vein Of Arm Or Leg, Accessed Through The Skin Using Imaging Guidance	\$1,866.60
	Chemical Destruction Of Incompetent Vein Of Arm Or Leg, Accessed Through The Skin Using Imaging Guidance, Subsequent Vein(S)	\$146.16
	Venous Catheterization For Selective Organ Blood Sampling	\$149.34
	Insertion Of Catheter Into Vein Of Navel, Newborn	\$90.04
	Therapeutic Apheresis; For White Blood Cells Therapeutic Apheresis For Bod Blood Cells	\$102.89
	Therapeutic Apheresis; For Red Blood Cells Therapeutic Apheresis; For Platelets	\$99.47 \$97.22
	Therapeutic Apheresis; For Plasma Pheresis	\$620.21
	Mechanical Separation Of Plasma And Abnormal Antibodies From Blood	\$1,781.23
	Photopheresis, Extracorporeal	\$1,365.61
	Insertion Of Central Venous Catheter For Infusion, Patient Younger Than 5 Years, Not Tunneled	\$204.54
	Insertion Of Central Venous Catheter For Infusion, Patient 5 Years Or Older, Not Tunneled	\$230.97
	Insertion Of Central Venous Catheter For Infusion, Patient Younger Than 5 Years, Tunneled	\$922.33
	Insertion Of Central Venous Catheter For Infusion, Patient 5 Years Or Older, Tunneled	\$923.74
36560	Insertion Of Central Venous Catheter And Implanted Device For Infusion Beneath The Skin, Patient Younger Than 5 Years	\$1,159.02
36561	Insertion Of Central Venous Catheter And Implanted Device For Infusion Beneath The Skin, Patient 5 Years Or Older	\$1,091.17
	Insertion Of Tunneled Centrally Inserted Central Venous Access Device With Subcutaneous Pump	\$1,111.10
	Insertion Of Central Venous Catheters For Infusion, Two Catheters In Two Veins	\$807.79
	Insertion Of Central Venous Catheters, Two Catheters In Two Veins, And Implanted Devices For Infusion Beneath The Skin	\$4,346.10
	Insertion Of Peripherally Inserted Central Venous Catheter For Infusion (Picc), Patient Younger Than 5 Years	\$92.03
	Insertion Of Peripherally Inserted Central Venous Catheter For Infusion (Picc), Patient 5 Years Or Older	\$93.87
	Insertion Of Central Venous Catheter For Infusion With Port Beneath The Skin, Patient Younger Than 5 Years	\$1,190.35
	Insertion Of Central Venous Catheter For Infusion With Port Beneath The Skin, Patient 5 Years Or Older	\$1,281.64
	Insertion Of Central Venous Catheter For Infusion Using Imaging Guidance, Patient Younger Than 5 Years	\$358.76
	Insertion Of Central Venous Catheter For Infusion Using Imaging Guidance, Patient 5 Years Or Older	\$393.58
	Repair Of Central Venous Catheter For Infusion Without A Port Or Pump	\$164.87
	Repair Of Central Venous Catheter For Infusion With A Port Or Pump Replacement Of Central Venous Catheter Device	\$335.14 \$425.85
	Replacement Of Central Venous Catheter, Non-Tunneled Without Port Or Pump	\$207.45
	Replacement Of Central Venous Catheter, Tunneled Without Port Or Pump	\$789.56
	Replacement of Central Venous Catheter, Tunneled With Port Or Pump	\$977.39
	Replacement Of Central Venous Catheter, Non-Tunneled With Port Or Pump	\$1,150.96
	Replacement Of Catheter In Peripheral Vein Accessed Through Same Vein	\$242.17
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36585	Replacement, Complete, Of A Peripherally Inserted Central Venous Access Device, With Subcutaneous Port, Through Same Venous Access	\$1,168.61
	Removal Of Tunneled Central Venous Catheter, Without Subcutaneous Port Or Pump	\$172.03
	Removal Of Tunneled Central Venous Access Device, With Subcutaneous Port Or Pump, Central Or Peripheral Insertion	\$230.77
	Collection Of Blood Specimen From A Completely Implantable Venous Access Device	\$23.12
	Collection Of Blood Specimen Using Established Central Or Peripheral Catheter, Venous, Not Otherwise Specified	\$25.44
36593	Declotting By Thrombolytic Agent Of Implanted Vascular Access Device Or Catheter	\$28.15
00505	Machanian Damana Of Parianthatas Obstantina Material /Fa Fibria Obstant Vancus Parian Via Cananta Vancus Assaus	#500.54
	Mechanical Removal Of Pericatheter Obstructive Material (Eg, Fibrin Sheath) From Central Venous Device Via Separate Venous Access	\$592.54
	Mechanical Removal Of Intraluminal (Intracatheter) Obstructive Material From Central Venous Device Through Device Lumen Repositioning Of Previously Placed Central Venous Catheter Under Fluoroscopic Guidance	\$109.39 \$117.79
30397	Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And	φ117.79
36598	Report	\$119.27
	Arterial Puncture, Withdrawal Of Blood For Diagnosis	\$29.94
	Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin	\$44.74
	Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown	\$104.58
36640	Insertion Of Catheter Into Artery For Prolonged Infusion Therapy	\$107.55
	Insertion Of Catheter Into An Artery In Navel, Newborn	\$70.90
	Placement Of Needle For Intraosseous Infusion	\$58.00
	Insertion Of Cannula Connecting Vein To Vein	\$122.84
	Insertion Of Cannula Connecting Artery To Vein	\$192.93
	Repositioning Or Removal Of Cannula Connecting Artery To Vein	\$115.63
	Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Cephalic Vein	\$664.04
	Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Basilic Vein	\$702.44
	Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Forearm Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Any Site As Separate Procedure	\$692.34 \$637.73
		\$637.72
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	Insertion Of Arterial And Venous Cannula(S) For Isolated Extracorporeal Circulation Including Regional Chemotherapy Perfusion To An Extremity, With Or Without Hyperthermia, With Removal Of Cannula(S) And Repair Of Arteriotomy And Venotomy Sites	\$1 244 22
36823	Extremity, With Or Without Hyperthermia, With Removal Of Cannula(S) And Repair Of Arteriotomy And Venotomy Sites	\$1,244.22 \$687.91
36823	Extremity, With Or Without Hyperthermia, With Removal Of Cannula(S) And Repair Of Arteriotomy And Venotomy Sites Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Autogenous Graft	\$1,244.22 \$687.91
36823 36825	Extremity, With Or Without Hyperthermia, With Removal Of Cannula(S) And Repair Of Arteriotomy And Venotomy Sites Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Autogenous Graft Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Nonautogenous Graft (Eg, Biological	\$687.91
36823 36825 36830	Extremity, With Or Without Hyperthermia, With Removal Of Cannula(S) And Repair Of Arteriotomy And Venotomy Sites Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Autogenous Graft Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Nonautogenous Graft (Eg, Biological Collagen, Thermoplastic Graft)	\$687.91
36823 36825 36830 36831	Extremity, With Or Without Hyperthermia, With Removal Of Cannula(S) And Repair Of Arteriotomy And Venotomy Sites Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Autogenous Graft Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Nonautogenous Graft (Eg, Biological	\$687.91 \$641.73
36823 36825 36830 36831 36832	Extremity, With Or Without Hyperthermia, With Removal Of Cannula(S) And Repair Of Arteriotomy And Venotomy Sites Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Autogenous Graft Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Nonautogenous Graft (Eg, Biological Collagen, Thermoplastic Graft) Removal Of Blood Clot From Dialysis Graft, Open Procedure	\$687.91 \$641.73 \$533.40 \$728.39
36823 36825 36830 36831 36832 36833	Extremity, With Or Without Hyperthermia, With Removal Of Cannula(S) And Repair Of Arteriotomy And Venotomy Sites Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Autogenous Graft Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Nonautogenous Graft (Eg, Biological Collagen, Thermoplastic Graft) Removal Of Blood Clot From Dialysis Graft, Open Procedure Revision Of Dialysis Graft, Open Procedure	\$687.91 \$641.73 \$533.40 \$728.39
36823 36825 36830 36831 36832 36833 36835	Extremity, With Or Without Hyperthermia, With Removal Of Cannula(S) And Repair Of Arteriotomy And Venotomy Sites Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Autogenous Graft Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Nonautogenous Graft (Eg, Biological Collagen, Thermoplastic Graft) Removal Of Blood Clot From Dialysis Graft, Open Procedure Revision Of Dialysis Graft, Open Procedure Revision Of Dialysis Graft With Removal Of Blood Cot, Open Procedure	\$687.91 \$641.73 \$533.40 \$728.39 \$728.78

Code	Description	Fee
	Distal Revascularization And Interval Ligation (Dril), Upper Extremity Hemodialysis Access (Steal Syndrome)	\$981.42
	External Cannula Declotting (Separate Procedure); Without Balloon Catheter	\$218.68
36861	Cannula Declotting; With Balloon Catheter	\$120.41
	Insertion Of Needle And/Or Catheter Into Dialysis Circuit, With Imaging Including Radiological Supervision And Interpretation	\$608.83
	Supervision And Interpretation	\$1,301.78
36903	Supervision And Interpretation	\$4,870.31
36904	Excision Of Blood Clot And/Or Infusion To Dissolve Blood Clot In Dialysis Circuit And Balloon Dilation Of Dialysis Segment, , Accessed Through The Skin, With Imaging Including Radiological Supervision And Interpretation, Without Balloon Catheter	\$1,895.92
	Excision Of Blood Clot And/Or Infusion To Dissolve Blood Clot In Dialysis Circuit And Balloon Dilation Of Dialysis Segment, , Accessed Through The Skin, With Imaging Including Radiological Supervision And Interpretation, With Balloon Catheter	\$2,426.58
	Removal Or Dissolving Of Blood Clot In Dialysis Circuit, With Balloon Dilation Of Dialysis Segment And Placement Of Stent, Accessed Through Skin, With Imaging	\$6,154.77
	Balloon Dilation Of Dialysis Segment, Accessed Through The Skin, With Imaging Including Radiological Supervision And Interpretation	\$653.17
	Insertion Of Stent In Dialysis Segment, With Imaging Including Radiological Supervision And Interpretation	\$1,590.91
	Permanent Blockage Of Dialysis Circuit, With Imaging Including Radiological Supervision And Interpretation	\$2,105.46
37140	Connection Of Vena Cava And Portal Vein Of Liver, Open Procedure	\$2,043.98
37145	Connection Of Renal (Kidney) Vein And Portal Vein Of Liver, Open Procedure	\$1,897.02
	Connection Of Vena Cava And Abdominal Vein, Open Procedure	\$2,164.61
	Connection Of Splenic (Spleen) And Renal (Kidney) Vein Near Aorta, Open Procedure	\$1,871.68
	Connection Of Splenic (Spleen) And Renal (Kidney) Vein, Open Procedure	\$2,043.98
	Portography With Hemodynamic Evaluation, Intrahepatic Tract Formation/Dilatation, Stent Placement And All Associated	\$820.27
3/183	Revision Of Shunts To Bypass Blood Flow To Liver Using Imaging Guidance	\$5,318.25
37184	Removal Of Blood Clot And Injections To Dissolve Blood Clot From Artery Or Arterial Graft Using Fluoroscopic Guidance, Accessed Through The Skin, Initial Vessel	\$1,897.82
37185	Removal Of Blood Clot And Injections To Dissolve Blood Clot From Artery Or Arterial Graft Using Fluoroscopic Guidance, Accessed Through The Skin, Subsequent Vessel(S)	\$513.40
	Removal Of Blood Clot And Injections To Dissolve Blood Clot From Artery Or Arterial Graft Using Fluoroscopic Guidance, Accessed Beneath The Skin	\$1,320.47
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37187	Removal Of Blood Clot And Injections (Accessed Through The Skin) To Dissolve Blood Clot From Veins Using Fluoroscopic Guidance, Initial	\$1,911.89
37188	Removal Of Blood Clot And Injections (Accessed Through The Skin) To Dissolve Blood Clot From Veins Using Fluoroscopic Guidance, Subsequent	\$1,637.02
	Insertion Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation	\$2,294.71
37192	Repositioning Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation	\$1,254.40
37193	Removal Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation	\$1,657.44
	Thrombolysis, Cerebral, By Intravenous Infusion	\$363.55
	Retrieval Of Foreign Body Of Blood Vessels, Accessed Through The Skin Including Radiological Supervision And Interpretation	\$1,735.79
	Transcatheter Biopsy	\$215.92
37211	Insertion Of Catheter Into Artery For Drug Infusion For Blood Clot Including Radiological Supervision And Interpretation Transcatheter Therapy, Venous Infusion For Thrombolysis, Any Method, Including Radiological Supervision And Interpretation, Initial Treatment Day	\$375.56 \$330.12
37213	Transcatheter Therapy, Arterial Or Venous Infusion For Thrombolysis Other Than Coronary, Any Method, Including Radiological Supervision And Interpretation, Continued Treatment On Subsequent Day During Course Of Thrombolytic Therapy, Including Follow-Up Catheter	\$226.77
	Removal Of Catheter In Artery Or Vein Including Radiological Supervision And Interpretation	\$118.90
	Insertion Of Stents And Blood Clot Protection Device In Neck Artery, Open Or Accessed Through The Skin	\$954.09
37216	Insertion Of Stents In Neck Artery, Open Or Accessed Through The Skin	\$1,112.02
37217	Insertion Of Intravascular Stents In Neck Artery With Radiological Supervision And Interpretation	\$929.57
37218	Insertion Of Stents In Blood Vessels Of Chest Open Or Accessed Through The Skin With Radiological Supervision And Interpretation	\$711.70
	Balloon Dilation Of Artery In One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure	\$2,801.82
	Insertion Of Stents In Artery In One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure	\$3,457.18
_	Balloon Dilation Of Groin Artery, Endovascular, Open, Or Percutaneous Approach	\$667.32
	Insertion Of Stents Into Groin Artery, Endovascular, Accessed Through The Skin Or Open Procedure Balloon Dilation Of Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure	\$1,426.94 \$3,281.06
_	Removal Of Plaque In Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure	\$9,969.23
	Insertion Of Stents Into Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure	\$9,301.36
37227	Removal Of Plaque And Insertion Of Stents Into Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure	\$12,778.54
	Balloon Dilation Of Artery Of One Leg, Endovascular, Accessed Through The Skin Or Open Procedure	\$4,675.74
	Removal Of Plaque In Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure	\$10,084.43
	Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure	\$10,145.55
	Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure	\$13,265.99
	Balloon Dilation Of Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure	\$904.21
37233	Removal Of Plaque In Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel	\$1,125.03
37234	Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each	\$3,678.95
37235	Additional Vessel	\$3,937.98
37236	Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial, Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation	\$2,451.38
	Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial,	
27227	Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each Additio	\$1,293.72
	Incortion Of Introvaccular Stanta In Vain Open Or Accessed Through The Skip With Bodials is all Companies and Interrestation	
37238	Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each	\$3,617.46
37238 37239		\$3,617.46 \$1,798.31 \$4,005.36

37242	Description Occlusion Of Astery (Other Than Hamershage Or Tymes) With Rediclosical Synantician And Interpretation, Readmanning, And Imaging	Fee
	Occlusion Of Artery (Other Than Hemorrhage Or Tumor) With Radiological Supervision And Interpretation, Roadmapping, And Imaging Guidance	\$6,764.85
37243	Occlusion Of Tumors Or Obstructed Blood Vessel With Radiological Supervision And Interpretation, Roadmapping, And Imaging Guidance	\$8,542.32
	Occlusion Of Arterial Or Venous Hemorrhage With Radiological Supervision And Interpretation, Roadmapping, And Imaging Guidance	\$5,960.82
	Balloon Dilation Of Artery, Accessed Through The Skin Or By Open Procedure, With Imaging Including Radiological Supervision And	* - /
37246	Interpretation, Initial Artery	\$2,036.31
37247	Balloon Dilation Of Artery, Accessed Through The Skin Or By Open Procedure, With Imaging Including Radiological Supervision And Interpretation, Each Additional Artery	\$595.68
31241	Balloon Dilation Of First Vein, Accessed Through The Skin Or By Open Procedure, With Imaging Including Radiological Supervision And	ψ393.00
37248	Interpretation	\$1,584.08
	Balloon Dilation Of Additional Vein, Accessed Through The Skin Or By Open Procedure, With Imaging Including Radiological Supervision And	
	Interpretation Ultrasound Evaluation Of Blood Vessel During Diagnosis Or Treatment, Initial Vessel	\$482.32 \$1,069.31
	Ultrasound Evaluation of Blood Vessel During Diagnosis Or Treatment, Initial Vessel Ultrasound Evaluation Of Blood Vessel During Diagnosis Or Treatment, Each Additional Vessel	\$1,069.31
	Vascular Endoscopy, Surgical, With Ligation Of Perforator Veins, Subfascial (Seps)	\$543.63
	Unlisted Vascular Endoscopy Procedure	Price By Report
	Ligation, Internal Jugular Vein	\$650.71
	Ligation; External Carotid Artery	\$664.08
	Ligation; Internal Or Common Carotid Artery Ligation; Internal Or Common Carotid Artery, With Gradual Occlusion, As With Selverstone Or Crutchfield Clamp	\$632.00 \$636.81
	Ligation Or Banding Of Angioaccess Arteriovenous Fistula	\$383.83
	Ligation Or Biopsy, Temporal Artery	\$273.77
	Ligation, Major Artery (Eg, Post-Traumatic, Rupture); Neck	\$479.09
	Ligation, Major Artery (Eg, Post-Traumatic, Rupture); Chest	\$803.74
	Ligation, Major Artery (Eg, Post-Traumatic, Rupture); Abdomen Ligation, Major Artery (Eg, Post-Traumatic, Rupture); Extremity	\$948.35 \$385.52
	Ligation of Inferior Vena Cava	\$1,519.60
	Ligation Of Femoral Vein	\$396.45
37660	Ligation Of Common Iliac Vein	\$1,160.84
	Tying And Incision Leg Vein, Long Saphenous Vein	\$216.48
	Ligation, Division, And Stripping, Short Saphenous Vein Ligation, Division, And Stripping, Long (Greater) Saphenous Veins From Saphenofemoral Junction To Knee Or Below	\$340.03
3//22	Ligation, And Division, And Complete Stripping Of Long Or Short Saphenous Veins With Radical Excision Of Ulcer And Skin Graft And/Or	\$408.05
37735	Interruption Of Communicating Veins Of Lower Leg, With Excision Of Deep Fascia	\$501.35
37760	Tying Of Varicose Veins In One Leg, Open Procedure, Radical	\$496.55
	Tying Of Varicose Veins In One Leg, Open Procedure, Simple	\$469.40
	Multiple Incisions For Removal Of Varicose Veins Of Arm Or Leg, 10-20 Incisions	\$443.47
	Multiple Incisions For Removal Of Varicose Veins Of Arm Or Leg, Greater Than 20 Incisions Tying And Incision Leg Vein, Short Saphenous Vein	\$514.09 \$205.71
	Ligation, Division, And/Or Excision Of Recurrent Or Secondary Varicose Veins (Clusters), One Leg	\$328.00
37788	Penile Revascularization, Artery, With Or Without Vein Graft	\$1,146.72
	Blockage Of Penis Vein	\$443.03
	Unlisted Procedure, Vascular Surgery	Price By Report
	Splenectomy; Total Splenectomy; Total Partial	
		\$901.11
55101		
38102	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure)	\$901.11
38102 38115	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy	\$901.11 \$1,030.61 \$229.61 \$1,141.95
38102 38115 38120	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy	\$901.11 \$1,030.61 \$229.61 \$1,141.95 \$1,075.41
38102 38115 38120 38129	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen	\$901.11 \$1,030.61 \$229.61 \$1,141.95 \$1,075.41 Price By Report
38102 38115 38120 38129 38200 38205	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorthaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic	\$901.11 \$1,030.61 \$229.61 \$1,141.95 \$1,075.41
38102 38115 38120 38129 38200 38205 38206	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous	\$901.11 \$1,030.61 \$229.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96
38102 38115 38120 38129 38200 38205 38206 38220	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow	\$901.11 \$1,030.61 \$229.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47
38102 38115 38120 38129 38200 38205 38206 38220 38221	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow	\$901.11 \$1,030.61 \$229.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37
38102 38115 38120 38129 38200 38205 38206 38220 38221 38222	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow	\$901.11 \$1,030.61 \$229.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37
38102 38115 38120 38129 38200 38205 38206 38220 38221 38222 38230	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow	\$901.11 \$1,030.61 \$229.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37 \$181.46
38102 38115 38120 38129 38200 38205 38206 38220 38221 38222 38230 38232 38232 38240	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorthaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor	\$901.11 \$1,030.61 \$229.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37
38102 38115 38120 38129 38200 38205 38206 38220 38221 38222 38230 38232 38240 38241	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Patient-Derived Stem Cells	\$901.11 \$1,030.61 \$229.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37 \$181.46 \$180.63 \$177.19 \$210.58
38102 38115 38120 38129 38200 38205 38206 38220 38221 38222 38230 38232 38232 38240 38241 38241	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Patient-Derived Stem Cells Transplantation Of Donor White Cells (Lymphocytes)	\$901.11 \$1,030.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37 \$181.46 \$180.63 \$177.19 \$210.58
38102 38115 38120 38129 38200 38205 38206 38220 38221 38232 38232 38240 38241 38242 38242	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Ponor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Patient-Derived Stem Cells Transplantation Of Donor White Cells (Lymphocytes) Transplantation Of Donor Stem Cells	\$901.11 \$1,030.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37 \$181.46 \$180.63 \$177.19 \$210.58 \$164.14
38102 38115 38120 38200 38200 38206 38220 38221 38222 38230 38232 38240 38242 38243 38243	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Patient-Derived Stem Cells Transplantation Of Donor White Cells (Lymphocytes)	\$901.11 \$1,030.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37 \$181.46 \$180.63 \$177.19 \$210.58
38102 38115 38120 38200 38205 38206 38220 38221 38222 38230 38232 38240 38241 38242 38243 38243 38243	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor White Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation	\$901.11 \$1,030.61 \$1,030.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37 \$181.46 \$180.63 \$177.19 \$210.58 \$164.14 \$115.16 \$299.94
38102 38115 38120 38120 38205 38206 38221 38222 38232 38232 38240 38241 38242 38243 38305 38305 38308	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor Stem Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation Extensive Drainage Of Lymph Node Abscess Or Inflammation Incision Or Other Operation On Lymphatic Channels Suture And/Or Tying Chest Lymph Duct, Cervical	\$901.11 \$1,030.61 \$1,030.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37 \$181.46 \$180.63 \$177.19 \$210.58 \$164.14 \$118.44 \$115.16 \$299.94 \$447.14
38102 38115 38120 38129 38205 38206 38221 38222 38230 38241 38242 38243 38300 38305 38308 38380 38380	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenotrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor White Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation Extensive Drainage Of Lymph Node Abscess Or Inflammation Incision Or Other Operation On Lymphatic Channels Suture And/Or Tying Chest Lymph Duct, Thoracic	\$901.11 \$1,030.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37 \$181.46 \$180.63 \$177.19 \$210.58 \$164.14 \$118.44 \$115.16 \$299.94 \$447.14 \$417.45 \$522.13
38102 38115 38120 38129 38200 38205 38220 38221 38232 38230 38241 38242 38243 38243 38300 38305 38308 38388 38381	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor Stem Cells (Lymphocytes) Transplantation Of Donor Stem Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation Extensive Drainage Of Lymph Node Abscess Or Inflammation Incision Or Other Operation On Lymphatic Channels Suture And/Or Tying Chest Lymph Duct, Thoracic Suture And/Or Tying Chest Lymph Duct, Abdominal	\$901.11 \$1,030.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37 \$181.46 \$190.63 \$177.19 \$210.58 \$164.14 \$118.44 \$115.16 \$299.94 \$447.14 \$417.45 \$522.13 \$706.06
38102 38115 38120 38129 38200 38205 38220 38221 38222 38230 38232 38241 38242 38243 38300 38305 38388 38388 38381 38382 38500	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor White Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation Extensive Drainage Of Lymph Node Abscess Or Inflammation Incision Or Other Operation On Lymphatic Channels Suture And/Or Tying Chest Lymph Duct, Cervical Suture And/Or Tying Chest Lymph Duct, Thoracic Suture And/Or Tying Chest Lymph Nodes, Open Procedure	\$901.11 \$1,030.61 \$1,030.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37 \$181.46 \$180.63 \$177.19 \$210.58 \$164.14 \$115.16 \$299.94 \$447.14 \$417.45 \$522.13 \$706.06 \$609.29
38102 38115 38120 38205 38206 38220 38221 38222 38232 38232 38240 38241 38242 38243 38305 38305 38305 38380 38380 38380 38380	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor Stem Cells (Lymphocytes) Transplantation Of Donor Stem Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation Extensive Drainage Of Lymph Node Abscess Or Inflammation Incision Or Other Operation On Lymphatic Channels Suture And/Or Tying Chest Lymph Duct, Thoracic Suture And/Or Tying Chest Lymph Duct, Abdominal	\$901.11 \$1,030.61 \$1,030.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37 \$181.46 \$180.63 \$177.19 \$210.58 \$164.14 \$118.44 \$115.16 \$299.94 \$447.14 \$417.45 \$522.13 \$706.02 \$609.29
38102 38115 38120 38120 38206 38206 38220 38221 38232 38232 38240 38242 38243 38300 38300 38380 38380 38380 38381 38381 38382 38500 38500	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Biopsy Of Bone Marrow Biopsy Of Bone Marrow For Transplantation Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor White Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation Extensive Drainage Of Lymph Node Abscess Or Inflammation Incision Or Other Operation On Lymphatic Channels Suture And/Or Tying Chest Lymph Duct, Cervical Suture And/Or Tying Chest Lymph Duct, Abdominal Biopsy Or Removal Of Lymph Nodes, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure	\$901.11 \$1,030.61 \$1,030.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37 \$181.46 \$180.63 \$177.19 \$210.58 \$164.14 \$115.16 \$299.94 \$447.14 \$417.45 \$522.13 \$706.06 \$609.29
38102 38115 38120 38205 38206 38220 38221 38222 38232 38232 38240 38241 38242 38243 38300 38381 38382 38380 38381 38380 38380 38505 38505	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor White Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation Extensive Drainage Of Lymph Node Abscess Or Inflammation Incision Or Other Operation On Lymphatic Channels Suture And/Or Tying Chest Lymph Duct, Thoracic Suture And/Or Tying Chest Lymph Duct, Thoracic Suture And/Or Tying Chest Lymph Duct, Abdominal Biopsy Or Removal Of Lymph Nodes, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure	\$901.11 \$1,030.61 \$229.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37 \$181.46 \$180.63 \$177.19 \$210.58 \$164.14 \$118.44 \$115.16 \$299.94 \$447.14 \$417.45 \$522.13 \$706.06 \$609.29 \$229.01 \$125.63 \$359.44
38102 38115 38120 38129 38205 38206 38221 38222 38230 38241 38242 38243 38344 38300 38365 38383 38380 38381 38380 38381 38382 38500 38505 38510 38525 38530	Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Biopsy Of Bone Marrow Biopsy Of Bone Marrow For Transplantation Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor White Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation Extensive Drainage Of Lymph Node Abscess Or Inflammation Incision Or Other Operation On Lymphatic Channels Suture And/Or Tying Chest Lymph Duct, Cervical Suture And/Or Tying Chest Lymph Duct, Abdominal Biopsy Or Removal Of Lymph Nodes, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure	\$901.11 \$1,030.61 \$1,030.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37 \$181.46 \$180.63 \$177.19 \$210.58 \$164.14 \$118.44 \$115.16 \$29.94 \$447.14 \$417.45 \$522.13 \$706.06 \$609.29 \$229.01 \$125.63

ode Description 38550 Removal Of Congenital Defect Of Lymph Nodes At Underarm Or Neck Without Deep Dissection 38555 Removal Of Congenital Defect Of Lymph Nodes At Underarm Or Neck With Deep 38562 Limited Lymphadenectomy For Staging (Separate Procedure); Pelvic 38570 Laparoscopy, Surgical; With Retroperitoneal Lymph Node Sampling (Biopsy), Single Or Multiple 38571 Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy 38572 Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy And Peri-Aortic Lymph Node Sampling (Biopsy), Single Or Multiple 38573 Removal Of All Lymph Nodes Of Both Sides Of Pelvis Using An Endoscope 38589 Unlisted Laparoscopy Procedure, Lymphatic System 38700 Suprahyoid Lymphadenectomy	\$473.36 \$918.87 \$642.39 \$632.72 \$518.89
Removal Of Congenital Defect Of Lymph Nodes At Underarm Or Neck With Deep Limited Lymphadenectomy For Staging (Separate Procedure); Pelvic Retroperitoneal (Aortic And/Or Splenic) Laparoscopy, Surgical; With Retroperitoneal Lymph Node Sampling (Biopsy), Single Or Multiple Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy Removal Of All Lymph Nodes Of Both Sides Of Pelvis Using An Endoscope Unlisted Laparoscopy Procedure, Lymphatic System	\$918.87 \$642.39 \$632.72
Limited Lymphadenectomy For Staging (Separate Procedure); Pelvic Limited Lymphadenectomy For Staging (Separate Procedure); Retroperitoneal (Aortic And/Or Splenic) Laparoscopy, Surgical; With Retroperitoneal Lymph Node Sampling (Biopsy), Single Or Multiple Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy And Peri-Aortic Lymph Node Sampling (Biopsy), Single Or Multiple Removal Of All Lymph Nodes Of Both Sides Of Pelvis Using An Endoscope Unlisted Laparoscopy Procedure, Lymphatic System	\$642.39 \$632.72
 Limited Lymphadenectomy For Staging (Separate Procedure); Retroperitoneal (Aortic And/Or Splenic) Laparoscopy, Surgical; With Retroperitoneal Lymph Node Sampling (Biopsy), Single Or Multiple Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy And Peri-Aortic Lymph Node Sampling (Biopsy), Single Or Multiple Removal Of All Lymph Nodes Of Both Sides Of Pelvis Using An Endoscope Unlisted Laparoscopy Procedure, Lymphatic System 	\$632.72
Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy And Peri-Aortic Lymph Node Sampling (Biopsy), Single Or Multiple Removal Of All Lymph Nodes Of Both Sides Of Pelvis Using An Endoscope Unlisted Laparoscopy Procedure, Lymphatic System	\$518.89
28572 Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy And Peri-Aortic Lymph Node Sampling (Biopsy), Single Or Multiple 38573 Removal Of All Lymph Nodes Of Both Sides Of Pelvis Using An Endoscope 38589 Unlisted Laparoscopy Procedure, Lymphatic System	+5.00
Removal Of All Lymph Nodes Of Both Sides Of Pelvis Using An Endoscope Unlisted Laparoscopy Procedure, Lymphatic System	\$669.35
Removal Of All Lymph Nodes Of Both Sides Of Pelvis Using An Endoscope Unlisted Laparoscopy Procedure, Lymphatic System	
38589 Unlisted Laparoscopy Procedure, Lymphatic System	\$914.72
	\$1,179.14
38700 Supranyold Lymphadenectomy	Price By Report
38720 Cervical Lymphadenectomy (Complete)	\$723.96 \$1,219.28
38724 Removal Of Lymph Nodes, Muscle, And Tissue Of Neck	\$1,162.73
38740 Axillary Lymphadenectomy; Superficial	\$627.87
38745 Axillary Lymphadenectomy; Complete	\$786.61
38746 Procedure)	\$205.66
Abdominal Lymphadenectomy, Regional, Including Celiac, Gastric, Portal, Peripancreatic, With Or Without Para-Aortic And Vena Caval Nodes (List Separately In Addition To Code For Primary Procedure)	
38760 Removal Of Lymph Nodes At Groin	\$750.82
38765 Removal Of Lymph Nodes At Groin And Pelvis, Superficial	\$1,174.50
38770 Pelvic Lymphadenectomy, Including External Iliac, Hypogastric, And Obturator Nodes (Separate Procedure)	\$729.55
38780 Retroperitoneal Lymphadenectomy, Extensive, Including Pelvic, Aortic, And Renal Nodes (Separate Procedure)	\$938.63
38790 Injection Procedure; Lymphangiography	\$73.56
38792 Injection Procedure; Radioactive Tracer For Identification Of Sentinel Node	\$57.59
38794 Cannulation, Thoracic Duct	\$272.59
Intraoperative Identification (Eg, Mapping) Of Sentinel Lymph Node(S), Includes Injection Of Non-Radioactive Dye, When Performed (List 38900 Separately In Addition To Code For Primary Procedure)	\$134.01
38999 Unlisted Procedure, Hemic Or Lymphatic System	Price By Report
39000 Drainage, Biopsy, Or Removal Of Foreign Body Of Chest Cavity, Cervical	\$447.99
39010 Drainage, Biopsy, Or Removal Of Foreign Body Of Chest Cavity, Transthoracic, With Sternotomy	\$771.49
39200 Resection Of Mediastinal Cyst	\$761.06
39220 Resection Of Mediastinal Tumor	\$999.89
39401 Examination Of Chest Using An Endoscope With Biopsy	\$268.41
39402 Examination Of Chest Using An Endoscope With Lymph Node Biopsy	\$389.16
39499 Unlisted Procedure, Mediastinum	Price By Report
Repair, Laceration Of Diaphragm, Any Approach	\$843.79
39503 Repair Of Congenital Defect Of Muscle Separating The Chest And Abdominal Cavities, Neonate 39540 Repair Of Injury To Muscle Separating The Chest And Abdominal Cavities, Acute	\$5,591.45 \$763.64
39541 Repair Of Injury To Muscle Separating The Chest And Abdominal Cavities, Actie Repair Of Injury To Muscle Separating The Chest And Abdominal Cavities, Chronic	\$832.13
39545 Imbrication Of Diaphragm For Eventration, Transthoracic Or Transabdominal, Paralytic Or Nonparalytic	\$862.39
39560 Resection, Diaphragm; With Simple Repair (Eg, Primary Suture)	\$831.78
39561 Resection, Diaphragm; With Complex Repair (Eg, Prosthetic Material, Local Muscle Flap)	\$1,105.91
39599 Unlisted Procedure, Diaphragm	Price By Report
40490 Biopsy Lip	\$85.82
40500 Vermilionectomy (Lip Shave), With Mucosal Advancement	\$499.97
40510 Excision Lip; Transverse Wedge Excision With Primary Closure	\$465.86
40520 Excision Lip; V-Excision With Primary Direct Linear Closure	\$477.23
40525 Removal Of Lip With Local Skin Flap Repair	\$508.84
40527 Removal Of Lip With Cross Skin Flap Repair	\$578.89
40530 Resection Lip, More Than One-Fourth, Without Reconstruction	\$528.76
40650 Repair Of Lip And Border	\$334.15
40652 Repair Of Vertical Lip Wound Extending To Half Of Lip 40654 Repair Of Vertical Lip Wound Extending To Over Half Of Lip	\$445.35 \$551.20
40654 Repair Of Vertical Lip Wound Extending To Over Hair Of Lip 40700 Plastic Repair Of Cleft Lip/Nasal Deformity; Primary, Partial Or Complete, Unilateral	\$551.30 \$1,020.17
40701 Plastic Repair Of Deformity Present At Birth On Both Sides Of The Nose Or Lip, One Stage	\$1,202.97
40701 Plastic Repair Of Deformity Present At Birth On Both Sides Of The Nose Or Lip, One Stage	\$1,010.85
40720 Plastic Repair Of Nasal And Lip Deformity Present At Birth, Without A Flap	\$962.17
40761 Plastic Repair Of Nasal And Lip Deformity Present At Birth With A Flap	\$980.75
40799 Unlisted Procedure, Lips	Price By Report
40800 Incision Of Abscess, Cyst, Or Blood Accumulation In Mouth, Uncomplicated	\$144.65
40801 Incision Of Abscess, Cyst, Or Blood Accumulation In Mouth, Complicated	\$260.30
40804 Removal Of Embedded Foreign Body Of Mouth, Simple	\$180.47
40805 Removal Of Embedded Foreign Body Of Mouth, Complicated	\$215.21
40806 Incision Of Labial Frenum (Frenotomy)	\$70.84
40808 Biopsy, Vestibule Of Mouth	\$119.39
40810 Excision Of Lesion Of Mucosa And Submucosa; Without Repair	\$153.23
40812 Excision Of Lesion Of Mucosa And Submucosa; With Simple Repair 40814 Excision Of Lesion Of Mucosa And Submucosa; With Complex Repair	\$201.37 \$270.26
40814 Excision Of Lesion Of Mucosa, Submucosa, And Underlying Muscle	\$270.26 \$382.16
40818 Excision Of Mucosa As Donor Graft	\$352.16
40819 Excision Of Frenum, Labial Or Buccal (Frenumectomy, Frenulectomy, Frenectomy)	\$289.02
40820 Destruction Of Lesion Or Scar By Physical Methods (Eg, Thermal, Cryo, Chemical)	\$187.58
40830 Closure Of Laceration; Up To 2 Cm	\$225.54
	\$218.35
40831 Closure Of Laceration; Over 2 Cm Or Complex	\$816.11
40831 Closure Of Laceration; Over 2 Cm Or Complex 40840 Repair To Increase Depth Of Mouth, Front Portion	
	\$872.94

Code	Description	Fee
	Repair To Increase Depth Of Mouth, Entire Arch	\$1,399.41
	Repair To Increase Depth Of Mouth, Complex	\$1,389.56
	Unlisted Inner Mouth Procedure	Price By Report
	Drainage Of Abscess, Cyst, Or Blood Accumulation Of Tongue	\$144.51
	Drainage Of Abscess, Cyst, Or Blood Accumulation Under The Tongue, Superficial From Within The Mouth Drainage Of Abscess, Cyst, Or Blood Accumulation Under The Tongue, Deep From Within The Mouth	\$217.21
	Drainage Of Abscess, Cyst, Of Blood Accumulation Order The Tongue, Deep From Within The Mouth Drainage Of Abscess, Cyst, Or Blood Accumulation Under The Tongue Or Lower Lip From Within The Mouth	\$253.92 \$314.08
	Drainage Of Abscess, Cyst, Or Blood Accumulation Under The Jaw Bone	\$371.79
-	Drainage Of Abscess, Cyst, Or Blood Accumulation Under Lower Teeth	\$295.59
	Incision Of Lingual Frenum (Frenotomy)	\$197.45
41015	Drainage Of Abscess, Cyst, Or Blood Accumulation Under The Tongue, Superficial From Outside Of The Mouth	\$381.03
41016	Drainage Of Abscess, Cyst, Or Blood Accumulation Under The Tongue Or Lower Lip From Outside Of The Mouth	\$451.93
-	Drainage Of Abscess, Cyst, Or Blood Accumulation Under The Tongue Or Jaw Bone	\$445.61
	Drainage Of Abscess, Cyst, Or Blood Accumulation Under The Tongue Or Lower Teeth	\$497.22
	Insertion Of Needles, Catheters, Or Devices Into Head And/Or Neck For Radiation Delivery	\$450.50
-	Biopsy Of Tongue, Front Two Thirds	\$168.94
	Biopsy Of Tongue, Back On Third Biopsy, Floor Of Mouth	\$179.73 \$152.24
	Removal Of Growth Of Tongue Without Suturing	\$162.42
	Removal Of Growth Of Tongue With Suturing, Front Two-Thirds	\$237.86
	Removal Of Growth Of Tongue With Suturing, Back One-Third	\$348.46
	Removal Of Growth Of Tongue With Local Tissue Flap	\$568.66
	Excision Of Lingual Frenum (Frenectomy)	\$185.55
41116	Excision Lesion Of Floor Of Mouth	\$301.74
	Removal Of Less Than Half Of Tongue	\$941.15
	Glossectomy; Hemiglossectomy	\$1,230.42
	Glossectomy; Partial, With Unilateral Radical Neck Dissection	\$2,006.48
	Glossectomy; Complete Or Total, With Or Without Tracheostomy, Without Radical Neck Dissection	\$2,032.04
	Glossectomy; Complete Or Total, With Or Without Tracheostomy, With Unilateral Radical Neck Dissection	\$2,557.38
	Removal Of Tongue, Floor Of Mouth, And Jaw Bone Removal Of Tongue, Floor Of Mouth, Soft Tissue, And Lymph Nodes	\$2,041.25
	Removal Of Tongue, Floor Of Mouth, Jaw Bone, Tissue, And Lymph Nodes	\$2,217.42 \$2,767.67
	Repair Of (2.5 Centimeter Or Less) Laceration To Floor Of Mouth And/Or Tongue	\$198.78
	Repair Of Laceration (2.5 Centimeter Or Less) Of Back Third Of Tongue	\$296.40
	Repair Of Laceration (More Than 2.5 Centimeter Or Complex) Of Tongue Or Floor Of Mouth	\$228.64
	Suture Of Tongue To Lip To Enlarge Mouth	\$435.06
41512	Permanent Suture Suspension Of Tongue Base	\$644.49
-	Repair Of Tissue Connecting Tongue To Floor Of Mouth	\$326.31
	Destruction Of Tongue Tissue, Per Session	\$916.78
	Unlisted Procedure, Tongue, Floor Of Mouth	Price By Report
	Drainage Of Abscess, Cyst, Or Blood Accumulation Of Dental Bone	\$207.20
	Removal Embedded Foreign Body; From Soft Tissues Removal Embedded Foreign Body; From Bone	\$306.15 \$400.50
	Gingivectomy, Excision Gingiva, Each Quadrant	\$225.36
	Operculectomy, Excision Pericoronal Tissues	\$127.51
	Excision Of Fibrous Tuberosities, Dentoalveolar Structures	\$337.68
41823	Excision Of Osseous Tuberosities, Dentoalveolar Structures	\$501.86
41825	Excision Of Lesion Or Tumor (Except Listed Above), Dentoalveolar Structures Without Repair	\$212.52
41826	Removal Of Growth Of Dental Bone With Repair, Simple	\$215.20
	Removal Of Growth Of Dental Bone With Repair, Complex	\$416.92
	Excision Of Hyperplastic Alveolar Mucosa, Each Quadrant (Specify)	\$332.19
	Alveolectomy, Including Curettage Of Osteitis Or Sequestrectomy	\$445.90
	Destruction Of Tissue Abnormality Of Structure Supporting Teeth	\$56.34
	Periodontal Mucosal Grafting Reshaping Of Gum	\$159.04
	Resnaping Of Tooth Socket	\$447.20 \$371.22
	Unlisted Procedure, Dentoalveolar Structures	Price By Report
	Drainage Of Abscess Of Palate, Uvula	\$112.85
	Biopsy Of Palate, Uvula	\$102.70
	Removal Of Growth Of Roof Of Mouth Without Suturing	\$152.20
	Removal Of Growth Of Roof Of Mouth, With Simple Suturing	\$247.66
	Removal Of Growth Of Roof Of Mouth, With A Local Tissue Flap	\$437.59
	Resection Palate Or Extensive Resection Of Lesion	\$945.43
	Removal Of Soft Tissue At Roof Of Mouth, Simple	\$221.43
	Removal Of Soft Tissue At Roof Of Mouth, Complex	\$705.67
	Destruction Of Lesion, Palate Or Uvula (Thermal, Cryo Or Chemical)	\$223.46
	Repair Of Lacerated Roof Of Mouth, 2.0 Cm Or Less Repair Laceration Of Palate; Over 2 Cm Or Complex	\$243.36 \$312.46
-	Repair Caceration of Palate; over 2 cm or complex Repair Of Defect Of Roof Of Mouth Of Soft And Hard Plate	\$312.46 \$944.92
	Repair Of Defect Of Roof Of Mouth, Alveolar Ridge, Soft Tissue	\$882.57
42205		\$1,095.82
	Repair Of Defect Of Roof Of Mouth, Alveolar Ridge, With Graft	
42210	Repair Of Defect Of Roof Of Mouth, Alveolar Ridge, With Graft Repair Of Defect Of Roof Of Mouth, Major Revision	\$718.70
42210 42215		
42210 42215 42220	Repair Of Defect Of Roof Of Mouth, Major Revision	\$718.70
42210 42215 42220 42225 42226	Repair Of Defect Of Roof Of Mouth, Major Revision Lengthening Of Roof Of Mouth And Repair Of Cleft Palate	\$718.70 \$533.75

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	Description Lengthening Of Roof Of Mouth With Flap From The Lower Interior Nasal Septal Area	Fee \$700.46
	Repair Nasolabial Fistula	\$808.08
	Maxillary Impression For Palatal Prosthesis	\$170.67
	Insertion Of Pin-Retained Palatal Prosthesis	\$216.47
	Unlisted Roof Of The Mouth Procedure	Price By Report
42300	Drainage Of Abscess Of Salivary Gland, Uncomplicated	\$193.53
42305	Drainage Of Abscess Of Salivary Gland, Complicated	\$393.71
	Drainage Of Lower Jaw Abscess From Within The Mouth	\$164.14
	Drainage Of Lower Jaw Abscess From Outside Of The Mouth	\$249.46
	Removal Of Salivary Gland Stone (Parotid) Uncomplicated Inside The Mouth	\$209.50
	Removal Of Salivary Gland (Submaxillary) Or Stone, Complicated Inside The Mouth	\$304.48
	Removal Of Salivary Gland (Parotid) Stone, Complicated Biopsy Salivary Gland; Needle	\$509.15
	Biopsy Of Salivary Gland By Incision	\$94.55 \$209.91
	Excision Sublingual Salivary Cyst (Ranula)	\$385.37
	Marsupialization Sublingual Salivary Cyst (Ranula)	\$279.36
	Removal Of Salivary Gland Growth Or Salivary Gland, Lateral Lobe	\$548.85
	Excision Parotid Tumor Or Parotid Gland; Lateral Lobe, With Dissection And Preservation Of Facial Nerve	\$970.21
	Excision Parotid Tumor Or Parotid Gland; Total, With Dissection And Preservation Of Facial Nerve	\$1,086.35
42425	Excision Parotid Tumor Or Parotid Gland; Total, En Bloc Removal With Sacrifice Of Facial Nerve	\$769.71
42426	Excision Parotid Tumor Or Parotid Gland; Total, With Unilateral Radical Neck Dissection	\$1,232.34
42440	Excision Submandibular (Submaxillary) Gland	\$425.82
	Excision Sublingual Gland	\$328.14
	Plastic Repair Of Salivary Duct, Simple	\$427.04
	Plastic Repair Of Salivary Duct, Complicated	\$542.18
	Parotid Duct Diversion, Bilateral (Wilke Type Procedure); Parotid Duct Diversion, Bilateral (Wilke Type Procedure); With Excision Of Both Submandibular Glands	\$462.71
	Parotid Duct Diversion, Bilateral (Wilke Type Procedure); With Excision Of Both Submandibular Glands Creation Of New Drainage Tracts Of Major Salivary Gland Ducts On Both Sides Of Mouth With Tying Of Salivary Gland Ducts	\$760.21
	Injection Procedure For Sialography	\$566.07 \$153.86
	Closure Salivary Fistula	\$520.73
	Dilation Salivary Duct	\$51.77
	Dilation And Catheterization Of Salivary Duct, With Or Without Injection	\$101.34
	Ligation Salivary Duct, Intraoral	\$362.63
42699	Unlisted Procedure, Salivary Glands Or Ducts	Price By Report
42700	Incision And Drainage Abscess; Peritonsillar	\$189.01
	Drainage Of Throat Abscess, Through The Mouth	\$306.46
	Drainage Of Throat Abscess, From Outside The Mouth	\$538.60
	Biopsy; Oropharynx	\$150.41
	Biopsy Of Throat Lesion Behind Nose, Simple	\$207.65
	Biopsy Of Throat Lesion Behind Nose, Complex	\$230.55
	Excision Or Destruction Of Lesion Of Pharynx, Any Method Removal Of Foreign Body From Pharynx	\$218.93
	Excision Branchial Cleft Cyst Or Vestige; Confined To Skin And Subcutaneous Tissues	\$181.94 \$271.70
	Excision Branchial Cleft Cyst Or Vestige; Extending Beneath Subcutaneous Tissues	\$558.05
	Tonsillectomy And Adenoidectomy; Under Age 12	\$298.62
	Tonsillectomy And Adenoidectomy; Age 12 Or Over	\$312.20
	Tonsillectomy, Primary Or Secondary; Under Age 12	\$276.64
42826	Tonsillectomy, Primary Or Secondary; Age 12 Or Over	\$262.84
42830	Removal Of Adenoids Patient Younger Than Age 12, Initial Procedure	\$218.94
	Removal Of Adenoids Patient Age 12 Or Over, Initial Procedure	\$236.13
	Removal Of Adenoids Patient Younger Than Age 12, Secondary Procedure	\$166.87
	Removal Of Adenoids Patient Age 12 Or Over, Secondary Procedure	\$226.72
	Removal Of Tonsils, Tissue, Muscle, And Bone, Without Closure	\$947.89
	Removal Of Tonsils, Tissue, Muscle, And Bone, Closure With Local Flap	\$1,285.55
	Removal Of Tonsils, Tissue, Muscle, And Bone, Closure With Other Flap Excision Of Tonsil Tags	\$2,043.37
	Excision Of Tonsii Tags Excision Or Destruction Lingual Tonsil, Any Method (Separate Procedure)	\$179.69 \$411.79
	Limited Pharyngectomy	\$1,321.14
	Partial Removal Of Wall Of Throat (Pharynx) With Suture Repair	\$1,739.31
	Removal Of Throat Tissue	\$2,193.59
	Suture Pharynx For Wound Or Injury	\$304.47
	Pharyngoplasty (Plastic Or Reconstructive Operation On Pharynx)	\$732.14
42953	Pharyngoesophageal Repair	\$905.52
	Pharyngostomy (Fistulization Of Pharynx, External For Feeding)	\$718.44
	Control Of Bleeding Of Throat, Uncomplicated	\$140.74
	Control Oropharyngeal Hemorrhage (Primary Or Secondary, Eg, Posttonsillectomy); Complicated, Requiring Hospitalization	\$369.29
	Control Of Bleeding Of Throat, Complicated	\$527.34
42970	Control Of Bleeding Of Throat With Insertion Of Packing, Uncomplicated	\$361.67
42971	Control Of Nasopharyngeal Hemorrhage (Primary Or Secondary, Eg, Postadenoidectomy); Complicated, Requiring Hospitalization	\$419.57
	Control Of Bleeding Of Throat With Insertion Of Packing, Complicated	\$470.67
	Evaluation Of Sleep-Disordered Breathing By Examination Of Upper Airway Using An Endoscope	\$82.96
	Throat, Adenoids, Or Tonsils Procedure	Price By Report
	Removal Of Foreign Body In Esophagus, Cervical Approach	\$509.12
43030	Incision Of Muscle At Upper Esophagus (Cricopharyngeal Muscle)	\$481.27
400.		
	Removal Of Foreign Body In Esophagus, With Removal Of Foreign Body Removal Of Growth Of Esophagus, Cervical Approach	\$1,146.92 \$585.99

4010 Sommor Of Cerem Of Esperhages, Window Copen Charle Procedure 4,2556 4,2506 4,2	Code Description	Fee
43007 Removal OF Escaphagus, Willhout Open Chear Procedular 1,336.00		\$885.23
43008 Renoval Of Espohagus, Williau Clore Chees Procedure in Maching Intensive Repair 43118 Renoval Of Espohagus, Chees Chee Procedure 531071 Renoval Of Espohagus, Chees Chee Renoval Office Renovation		\$2,599.55
Partial Exportage, Open Chees Procedure, Neckating Intensin Repair Partial Exportage, Open Chees Partial Exportage, Open	43108 Removal Of Esophagus, Without Open Chest Procedure, Including Intestine Repair	\$3,849.08
Frair Esphagoctomy, Cenzoli, With Free Intestinal Conf. Including Microvascular Anabamoses, Obtaining the Graft And Intestinal Formal Esphagoctomy, Distant Printing, With Trouvers Applications of Advantage Intestinal Conference on Conferenc	43112 Removal Of Esophagus, Open Chest Procedure	\$3,021.09
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43330 Repair Of Esophagus, Abdominal Approach \$1,185.9 43331 Repair Of Esophagus, Thoracic Approach \$1,174.5 43332 Repair Of Paraesophageal Hemia Via Laparotomy, Without Mesh Implant \$1,130.3 43333 Repair Of Paraesophageal Hemia Via Laparotomy, Without Mesh Implant \$1,283.4 43334 Repair Of Paraesophageal Hemia Via Laparotomy, Without Mesh Implant \$1,283.4 43334 Repair Of Paraesophageal Hemia Via Thoracotomy, With Mesh Implant \$1,283.4 43334 Repair Of Paraesophageal Hemia Via Thoracotomy, With Mesh Implant \$1,285.4 43336 Repair Of Paraesophageal Hemia Via Thoracotomy, With Mesh Implant \$1,285.4 43337 Repair Of Paraesophageal Hemia Via Abdominal Incision, Without Mesh Implant \$1,285.2 43336 Repair Of Paraesophageal Hemia Via Abdominal Incision, Without Mesh Implant \$1,285.2 43337 Repair Of Paraesophageal Hemia Via Abdominal Incision, Without Mesh Implant \$1,285.2 43338 Repair Of Paraesophageal Hemia Via Abdominal Incision, Without Mesh Implant \$1,285.2 43340 Partial Removal Of Esophagus And Stomach, Abdominal Approach \$1,226.9 43341 Partial Removal Of Esophagus And Stomach, Abdominal Approach \$1,226.9 43352 Relocation Of Esophagus, Cervical \$1,165.4 43341 Partial Removal Of Esophagus, Cervical \$1,160.7 43352 Relocation Of Esophagus, Cervical \$1,160.7 43352 Relocation Of Esophagus To Stomach After Previous Partial Removal Of Bypass Of Esophagus, With Insertion Of Intestine \$2,380.1 43400 Ligation Of Staphing At Gastroesophageal Junction For Pre-Existing Esophageal Perforation \$2,240.5 43410 Stutre Of Wound Of Injury To Esophagus, Cervical Approach \$2,240.5 43420 Repair Of Abnormal Drainage Tract Of Esophagus, Thoracic Or Abdominal Approach \$2,240.5 43421 Stutre Of Wound Of Injury To Esophagus, Thoracic Or Abdominal Approach \$1,181.3 43452 Repair Of Abnormal Drainage Tract Of Esophagus, Thoracic Or Abdominal Approach \$1,181.3 43453 Dilation Of Esophagus Unguided \$1,197.5	43327	Repair Of Muscle At Lower Esophagus And Stomach, Laparotomy	\$809.53
43331 Repair Of Esophagus, Thoracic Approach \$1,174.5	43328	Repair Of Muscle At Lower Esophagus And Stomach, Thoracotomy	\$981.90
43332 Repair Of Paraesophageal Hemia Via Laparotomy, With Mesh Implant \$1,233.4 43333 Repair Of Paraesophageal Hemia Via Laparotomy, With Mesh Implant \$1,233.4 43334 Repair Of Paraesophageal Hemia Via Thoracotomy, With Mesh Implant \$1,097.7 43335 Repair Of Paraesophageal Hemia Via Thoracotomy, With Mesh Implant \$1,292.4 43336 Repair Of Paraesophageal Hemia Via Thoracotomy, With Mesh Implant \$1,295.4 43337 Repair Of Paraesophageal Hemia Via Abdominal Incision, With Mesh Implant \$1,295.4 43338 Repair Of Paraesophageal Hemia Via Abdominal Incision, With Mesh Implant \$1,347.5 Esophageal Lengtheniang Procedure (Eg., Colisi Gastroplasty Of Wedge Gastroplasty) (List Separately In Addition To Code For Primary 43338 Procedure) \$930.4 43340 Partial Removal Of Esophagus And Stomach, Abdominal Approach \$1,145.4 43341 Partial Removal Of Esophagus And Stomach, Thoracic Approach \$1,265.4 43351 Relocation Of Esophagus, Thoracic \$1,265.4 43361 Relocation Of Esophagus, Cervical \$1,265.4 43361 Reconnection Of Esophagus, Cervical \$3,367.5 43360 Reconnection Of Esophagus To Stomach After Previous Partial Removal Or Bypass Of Esophagus, With Insertion Of Portion Of Intestine \$2,380.1 43400 Ligation, Direct, Esophagus I To Stomach After Previous Partial Removal Or Bypass Of Esophagus, With Insertion Of Portion Of Intestine \$2,340.5 43410 Stutre Of Wound Or Injury To Esophagus, Cervical Approach \$3,245.5 43410 Stutre Of Wound Or Injury To Esophagus, Cervical Approach \$3,245.5 43410 Stutre Of Wound Or Injury To Esophagus, Cervical Approach \$3,245.5 43410 Stutre Of Wound Or Injury To Esophagus, Cervical Approach \$3,245.5 43410 Stutre Of Wound Or Injury To Esophagus, Cervical Approach \$3,245.5 43410 Stutre Of Wound Or Injury To Esophagus, Cervical Approach \$3,245.5 43410 Stutre Of Wound Or Injury To Esophagus, Cervical Approach \$3,245.5 43410 Stutre Of Wound Or Injury To Esophagus, Cervical Approach \$3,245.5 43410 Stutre Of Wound Or Injury To	43330	Repair Of Esophagus, Abdominal Approach	\$1,185.91
43338 Repair Of Paraesophageal Hernia Via Laparotomy, With Mesh Implant \$1,287.7	43331	Repair Of Esophagus, Thoracic Approach	\$1,174.51
Repair Of Paraesophageal Hernia Via Thoracotomy, Without Mesh Implant \$1.087.7	43332	Repair Of Paraesophageal Hernia Via Laparotomy, Without Mesh Implant	\$1,130.38
43336 Repair Of Paraesophageal Hernia Via Thoracotomy, With Mesh Implant \$1,292.24 43337 Repair Of Paraesophageal Hernia Via Abdominal Incision, Without Mesh Implant \$1,265.44 43337 Repair Of Paraesophageal Hernia Via Abdominal Incision, With Mesh Implant Esophageal Lengthening Procedure (Eg. Collis Gastroplasty) or Wedge Gastroplasty) (List Separately In Addition To Code For Primary 899.00 43348 Parla Removal Of Esophagus And Stomach, Abdominal Approach \$1,145.44 43341 Parlia Removal Of Esophagus And Stomach, Abdominal Approach \$1,126.67 43352 Relocation Of Esophagus, Thoracic Approach \$1,126.67 43352 Relocation Of Esophagus, Thoracic \$1,160.77 43352 Relocation Of Esophagus, Thoracic \$1,160.77 43352 Relocation Of Esophagus To Stomach After Previous Parlial Removal Of Esophagus, With Insertion Of Portion Of Intestine 43361 Reconnection Of Esophagus To Stomach After Previous Parlial Removal Or Bypass Of Esophagus, With Insertion Of Portion Of Intestine 43361 Reconnection Of Esophagus To Stomach After Previous Parlial Removal Or Bypass Of Esophagus, With Insertion Of Portion Of Intestine 43361 Suture Of Wound Or Injury To Esophagus, Cervical Approach 43410 Suture Of Wound Or Injury To Esophagus, Cervical Approach 43420 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach 43420 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach 43450 Dilation Of Esophagus Unguided 43460 Dilation Of Esophagus Unguided 43470 Sature Of Wound Or Injury To Esophagus, Thoracic Or Abdominal Approach 43480 Parlia Of Assorbage Unguided 43490 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach 43490 Parlia Of Esophagus With A Guided Wire 43490 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach 43491 Repair Of Abnormal Drainage Tract Of Esophagus Thoracic Or Abdominal Approach 43490 Repair Of Abnormal Drainage Tract Of Esophagus Thoracic Or Abdominal Approach 43400 Repa	43333	Repair Of Paraesophageal Hernia Via Laparotomy, With Mesh Implant	\$1,233.46
43336 Repair Of Paraesophageal Hernia Via Thoracotomy, With Mesh Implant \$1,292.24 43337 Repair Of Paraesophageal Hernia Via Abdominal Incision, Without Mesh Implant \$1,265.44 43337 Repair Of Paraesophageal Hernia Via Abdominal Incision, With Mesh Implant Esophageal Lengthening Procedure (Eg. Collis Gastroplasty) or Wedge Gastroplasty) (List Separately In Addition To Code For Primary 899.00 43348 Parla Removal Of Esophagus And Stomach, Abdominal Approach \$1,145.44 43341 Parlia Removal Of Esophagus And Stomach, Abdominal Approach \$1,126.67 43352 Relocation Of Esophagus, Thoracic Approach \$1,126.67 43352 Relocation Of Esophagus, Thoracic \$1,160.77 43352 Relocation Of Esophagus, Thoracic \$1,160.77 43352 Relocation Of Esophagus To Stomach After Previous Parlial Removal Of Esophagus, With Insertion Of Portion Of Intestine 43361 Reconnection Of Esophagus To Stomach After Previous Parlial Removal Or Bypass Of Esophagus, With Insertion Of Portion Of Intestine 43361 Reconnection Of Esophagus To Stomach After Previous Parlial Removal Or Bypass Of Esophagus, With Insertion Of Portion Of Intestine 43361 Suture Of Wound Or Injury To Esophagus, Cervical Approach 43410 Suture Of Wound Or Injury To Esophagus, Cervical Approach 43420 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach 43420 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach 43450 Dilation Of Esophagus Unguided 43460 Dilation Of Esophagus Unguided 43470 Sature Of Wound Or Injury To Esophagus, Thoracic Or Abdominal Approach 43480 Parlia Of Assorbage Unguided 43490 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach 43490 Parlia Of Esophagus With A Guided Wire 43490 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach 43491 Repair Of Abnormal Drainage Tract Of Esophagus Thoracic Or Abdominal Approach 43490 Repair Of Abnormal Drainage Tract Of Esophagus Thoracic Or Abdominal Approach 43400 Repa	43334	Repair Of Paraesophageal Hernia Via Thoracotomy, Without Mesh Implant	\$1.087.77
43336 Repair Of Paraesophageal Hernia Via Abdominal Incision, With Mesh Implant \$1,265.44 4337 Repair Of Paraesophageal Hernia Via Abdominal Incision, With Mesh Implant \$1,347.51 Esophageal Lengthening Procedure (Eg., Collis Gastroplasty) (Wedge Gastroplasty) (List Separately In Addition To Code For Primary 43338 Procedure \$9,90 43340 Partial Removal Of Esophagus And Stomach, Abdominal Approach \$1,145.44 43341 Partial Removal Of Esophagus And Stomach, Abdominal Approach \$1,269.51 43351 Relocation Of Esophagus, Thoracic \$1,160.75 43352 Relocation Of Esophagus, Cervical \$1,340.74 43360 Reconnection Of Esophagus, Cervical \$1,340.74 43360 Reconnection Of Esophagus To Stomach After Previous Partial Removal Or Bypass Of Esophagus, With Insertion Of Portion Of Intestine \$2,380.1 43401 Ligation, Direct, Esophageal Varices \$1,348.55 43402 Ligation Or Stapling At Gastroesophageal Junction For Pre-Existing Esophageal Perforation \$1,280.5 43415 Suture Of Wound Or Injury To Esophagus, Cervical Approach \$340.5 43426 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach \$32.240.5 43427 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach \$32.240.5 43428 Repair Of Abnormal Drainage Tract Of Esophagus, Thoracic Or Abdominal Approach \$32.240.5 43436 Biotion Of Esophagus With A Guided Wire \$32.35 43436 Diation Of Esophagus With A Guided Wire \$32.35 43439 Unlisted Procedure, Esophagus Using An Endoscope \$679.3 43439 Unlisted Procedure, Esophagus Using An Endoscope \$679.3 4350 Gastrotomy, With Suture Repair Of Bededing Ulcer \$31.16 4350 Gastrotomy, With Suture Repair Of Per-Existing Esophagus (Eg., Mallory-Weiss) \$31.16 4350 Gastrotomy, With Suture Repair Of Per-Existing Esophagoapatric Laceration (Eg., Mallory-Weiss) \$31.16 43510 Gastrotomy, With Suture Repair Of Per-Existing Esophagoapatric Laceration (Eg., Mallory-Weiss) \$31.16 43510 Gastrotomy, With Suture Repai			\$1,292,29
Aga337 Repair Of Paraesophageal Hernia Via Abdominal Incision, With Mesh Implant Esophageal Lengthening Procedure (Eg. Collis Gastroplasty Or Wedge Gastroplasty) (List Separately In Addition To Code For Primary \$99.01			\$1,265,40
Esophageal Lengthening Procedure (Eg. Collis Gastroplasty Or Wedge Gastroplasty) (List Separately In Addition To Code For Primary \$99.00 43330 Procedure) \$1,45.44 97 11 11 11 11 11 11 11 11 11 11 11 11 11			
\$99.00	10001		ψ.,σσσ
Partial Removal Of Esophagus And Stomach, Abdominal Approach \$1,145.44	43338	Procedure)	\$99.00
Partial Removal Of Esophagus And Stomach, Thoracic Approach \$1,226.97		·	
A3351 Relocation Of Esophagus, Thoracic \$1,160.79			. ,
A3352 Relocation Of Esophagus, Cervical \$939.74		1 0	
Reconnection Of Esophagus To Stomach After Previous Partial Removal Or Bypass Of Esophagus 43361 Reconnection Of Esophagus To Stomach After Previous Partial Removal Or Bypass Of Esophagus, With Insertion Of Portion Of Intestine \$2,380.1- 43400 Ligation, Direct, Esophagus I Varices \$1,348.56 Ligation Or Stapling At Gastroesophageal Junction For Pre-Existing Esophageal Perforation \$1,280.5- 43405 Ligation Or Stapling At Gastroesophageal Junction For Pre-Existing Esophageal Perforation \$1,280.5- 43415 Suture Of Wound Or Injury To Esophagus, Cervical Approach \$2,240.55 Suture Of Wound Or Injury To Esophagus, Thoracic Or Abdominal Approach \$3420 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach \$34340 Dilation Of Esophagus United \$34345 Dilation Of Esophagus With A Guided Wire \$43453 Dilation Of Esophagus With A Guided Wire \$43460 Esophagogastric Tamponade, With Balloon (Sengstaken Type) \$11,940.65 Free Jejunum Transfer With Microvascular Anastomosis \$1,798.86 43499 Unlisted Procedure, Esophagus \$1,998.86 43501 Gastrotomy With Exploration Or Foreign Body Removal; \$3501 Gastrotomy With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) \$1,197.56 43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) \$1,291.66 43605 Biopsy Of Stomach, By Laparotomy \$43606 Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) \$43607 Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation) \$43607 Storach, By Laparotomy \$43608 Storach, By Laparotomy \$43609 Storach, By Laparotomy \$43609 Storach, By Laparotomy \$43600 Storach, Cocal; With Esophagoganterostomy \$43600 Gastrectomy, Total; With Esophagogenterostomy			
Reconnection Of Esophagus To Stomach After Previous Partial Removal Or Bypass Of Esophagus, With Insertion Of Portion Of Intestine \$2,380.14 43400 Ligation, Direct, Esophageal Varices \$1,348.55 43405 Ligation Or Stapling At Gastroesophageal Junction For Pre-Existing Esophageal Perforation \$1,280.55 43410 Suture Of Wound Or Injury To Esophagus, Cervical Approach \$946.03 43410 Suture Of Wound Or Injury To Esophagus, Cervical Approach \$2,240.56 43420 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach \$3,932.56 43425 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach \$3,932.56 43425 Repair Of Abnormal Drainage Tract Of Esophagus, Thoracic Or Abdominal Approach \$1,181.36 43450 Dilation Of Esophagus Unguided \$1,181.37 43451 Dilation Of Esophagus With A Guided Wire \$2,00.93 43460 Esophagogastric Tamponade, With Balloon (Sengstaken Type) \$1,194.00 43496 Free Jejunum Transfer With Microvascular Anastomosis \$1,788.86 43497 Incision Of Muscle Of Lower Esophagus Using An Endoscope \$6,793.31 43499 Unlisted Procedure, Esophagus 4360 Gastrotomy; With Exploration Or Foreign Body Removal; \$701.34 43501 Gastrotomy; With Suture Repair Of Bleeding Ulcer \$1,197.56 43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) \$1,351.66 43610 Excision, Local; Ulcer Or Benign Tumor Of Stomach \$1,506.07 43620 Gastrectomy, Total; With Esophagoenterostomy \$1,150.56 43621 Gastrectomy, Total; With Esophagoenterostomy \$2,20.2.77			
43400Ligation, Direct, Esophageal Varices\$1,348.5043405Ligation Or Stapling At Gastroesophageal Junction For Pre-Existing Esophageal Perforation\$1,280.543410Suture Of Wound Or Injury To Esophagus, Cervical Approach\$946.0043415Suture Of Wound Or Injury To Esophagus, Thoracic Or Abdominal Approach\$2,240.5043420Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach\$932.5043425Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach\$1,181.3143450Dilation Of Esophagus Unguided\$183.7043451Dilation Of Esophagus Unguided\$183.7043452Esophagogastric Tamponade, With Balloon (Sengstaken Type)\$194.0043496Free Jejunum Transfer With Microvascular Anastomosis\$1,798.8043499Incision Of Muscle Of Lower Esophagus Using An Endoscope\$679.3143500Gastrotomy With Exploration Or Foreign Body Removal;\$701.3143501Gastrotomy; With Suture Repair Of Bleeding Ulcer\$1,197.5043502Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,331.6143510Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,331.6143610Excision, Local; Ulcer Or Benign Tumor Of Formanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin)\$847.5043610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$1,086.0043620Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.70	43360	reconnection of Esophagus to Stomach Alter Frevious Partial Removal of Bypass of Esophagus	\$1,960.86
43400Ligation, Direct, Esophageal Varices\$1,348.5043405Ligation Or Stapling At Gastroesophageal Junction For Pre-Existing Esophageal Perforation\$1,280.543410Suture Of Wound Or Injury To Esophagus, Cervical Approach\$946.0043415Suture Of Wound Or Injury To Esophagus, Thoracic Or Abdominal Approach\$2,240.5043420Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach\$932.5043425Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach\$1,181.3143450Dilation Of Esophagus Unguided\$183.7043451Dilation Of Esophagus Unguided\$183.7043452Esophagogastric Tamponade, With Balloon (Sengstaken Type)\$194.0043496Free Jejunum Transfer With Microvascular Anastomosis\$1,798.8043499Incision Of Muscle Of Lower Esophagus Using An Endoscope\$679.3143500Gastrotomy With Exploration Or Foreign Body Removal;\$701.3143501Gastrotomy; With Suture Repair Of Bleeding Ulcer\$1,197.5043502Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,331.6143510Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,331.6143610Excision, Local; Ulcer Or Benign Tumor Of Formanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin)\$847.5043610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$1,086.0043620Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.70	4000	December of Feeblague To Chemodo Affer Proving Partial Personal Or Disease Of Feeblague Will Leading Of Partial Or Disease Of Feeblague To Chemodo Affer Proving Provi	#0.000.44
Ligation Or Stapling At Gastroesophageal Junction For Pre-Existing Esophageal Perforation \$1,280.54 43410 Suture Of Wound Or Injury To Esophagus, Cervical Approach \$240.56 43415 Suture Of Wound Or Injury To Esophagus, Cervical Approach \$3420.56 43420 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach \$3932.57 43425 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach \$3932.57 43425 Repair Of Abnormal Drainage Tract Of Esophagus, Thoracic Or Abdominal Approach \$3932.57 43425 Dilation Of Esophagus Unguided \$383.77 43450 Dilation Of Esophagus With A Guided Wire \$382.97 43490 Dilation Of Esophagus With A Guided Wire \$392.97 43491 Incision Of Hussele Of Lower Esophagus Using An Endoscope \$392.57 43492 Unlisted Procedure, Esophagus \$392.57 43501 Gastrotomy; With Exploration Or Foreign Body Removal; \$392.57 43501 Gastrotomy; With Suture Repair Of Bleeding Ulcer \$392.57 43502 Gastrotomy; With Suture Repair Of Bleeding Ulcer \$392.57 43503 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) \$392.57 43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) \$392.57 43503 Biopsy Of Stomach, By Laparotomy \$392.57 43605 Biopsy Of Stomach, By Laparotomy \$392.57 43606 Gastrectomy, Total; With Esophagoenterostomy \$392.57 43607 43607 Gastrectomy, Total; With Roux-En-Y Reconstruction \$392.77 43607 Gastrectomy, Total; With Roux-En-Y Reconstruction			
43410Suture Of Wound Or Injury To Esophagus, Cervical Approach\$946.0343415Suture Of Wound Or Injury To Esophagus, Thoracic Or Abdominal Approach\$2,240.5443420Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach\$32.5643425Repair Of Abnormal Drainage Tract Of Esophagus, Thoracic Or Abdominal Approach\$1,181.3643450Dilation Of Esophagus Unguided\$183.7443451Dilation Of Esophagus With A Guided Wire\$820.9243460Esophagogastric Tamponade, With Balloon (Sengstaken Type)\$194.0443496Free Jejiunum Transfer With Microvascular Anastomosis\$1,798.8643497Incision Of Muscle Of Lower Esophagus Using An Endoscope\$679.3443499Unlisted Procedure, EsophagusPrice By Report43500Gastrotomy With Exploration Or Foreign Body Removal;\$701.3543501Gastrotomy; With Suture Repair Of Bleeding Ulcer\$1,197.5643510Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,351.0643510Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)\$888.6643605Biopsy Of Stomach, By Laparotomy\$746.5743610Excision, Local; Malignant Tumor Of Stomach\$1,086.0743621Excision, Local; Malignant Tumor Of Stomach\$1,086.0743622Gastrectomy, Total; With Esophagoenterostomy\$1,750.5743621Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.77			
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43450 Dilation Of Esophagus Unguided 43451 Dilation Of Esophagus With A Guided Wire 43460 Esophagogastric Tamponade, With Balloon (Sengstaken Type) 43496 Free Jejunum Transfer With Microvascular Anastomosis 43497 Incision Of Muscle Of Lower Esophagus Using An Endoscope 43499 Unlisted Procedure, Esophagus 43499 Unlisted Procedure, Esophagus 43500 Gastrotomy With Exploration Or Foreign Body Removal; 43501 Gastrotomy; With Suture Repair Of Bleeding Ulcer 43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) 43510 Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin) 43502 Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation) 43603 Biopsy Of Stomach, By Laparotomy 43610 Excision, Local; Ulcer Or Benign Tumor Of Stomach 43620 Gastrectomy, Total; With Esophagoenterostomy 43621 Gastrectomy, Total; With Roux-En-Y Reconstruction \$1,750.5			\$932.56
43453 Dilation Of Esophagus With A Guided Wire 43460 Esophagogastric Tamponade, With Balloon (Sengstaken Type) 43496 Free Jejunum Transfer With Microvascular Anastomosis 43497 Incision Of Muscle Of Lower Esophagus Using An Endoscope 43499 Unlisted Procedure, Esophagus 43499 Unlisted Procedure, Esophagus 43500 Gastrotomy With Exploration Or Foreign Body Removal; 43501 Gastrotomy; With Suture Repair Of Bleeding Ulcer 43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) 43510 Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin) 43602 Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation) 43603 Biopsy Of Stomach, By Laparotomy 43610 Excision, Local; Ulcer Or Benign Tumor Of Stomach 43620 Gastrectomy, Total; With Esophagoenterostomy 43621 Gastrectomy, Total; With Roux-En-Y Reconstruction \$2,002.72			\$1,181.36
43460Esophagogastric Tamponade, With Balloon (Sengstaken Type)\$194.0043496Free Jejunum Transfer With Microvascular Anastomosis\$1,798.8043497Incision Of Muscle Of Lower Esophagus Using An Endoscope\$679.3143499Unlisted Procedure, EsophagusPrice By Report43500Gastrotomy With Exploration Or Foreign Body Removal;\$701.3243501Gastrotomy; With Suture Repair Of Bleeding Ulcer\$1,197.5143502Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,351.6143510Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin)\$847.5243520Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)\$688.6143610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$1,740.6043621Excision, Local; Malignant Tumor Of Stomach\$1,750.5143622Gastrectomy, Total; With Esophagoenterostomy\$1,750.5143621Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.72			\$183.75
43460Esophagogastric Tamponade, With Balloon (Sengstaken Type)\$194.0043496Free Jejunum Transfer With Microvascular Anastomosis\$1,798.8043497Incision Of Muscle Of Lower Esophagus Using An Endoscope\$679.3143499Unlisted Procedure, EsophagusPrice By Report43500Gastrotomy With Exploration Or Foreign Body Removal;\$701.3243501Gastrotomy; With Suture Repair Of Bleeding Ulcer\$1,197.5143502Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,351.6143510Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin)\$847.5243520Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)\$688.6143610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$746.5143621Excision, Local; Malignant Tumor Of Stomach\$1,760.5043620Gastrectomy, Total; With Esophagoenterostomy\$1,750.5043621Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.72	43453	Dilation Of Esophagus With A Guided Wire	\$820.92
43496 Free Jejunum Transfer With Microvascular Anastomosis \$1,798.80 43497 Incision Of Muscle Of Lower Esophagus Using An Endoscope \$679.30 43499 Unlisted Procedure, Esophagus Price By Report 43500 Gastrotomy With Exploration Or Foreign Body Removal; \$701.30 43501 Gastrotomy; With Suture Repair Of Bleeding Ulcer \$1,197.50 43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) \$1,351.60 43510 Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin) \$847.55 43520 Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation) \$888.60 43605 Biopsy Of Stomach, By Laparotomy \$746.55 43610 Excision, Local; Ulcer Or Benign Tumor Of Stomach \$31,086.00 43620 Gastrectomy, Total; With Esophagoenterostomy \$1,750.55 43621 Gastrectomy, Total; With Roux-En-Y Reconstruction \$2,002.75	43460	Esophagogastric Tamponade, With Balloon (Sengstaken Type)	\$194.00
43497Incision Of Muscle Of Lower Esophagus Using An Endoscope\$679.3043499Unlisted Procedure, EsophagusPrice By Report43500Gastrotomy With Exploration Or Foreign Body Removal;\$701.3243501Gastrotomy; With Suture Repair Of Bleeding Ulcer\$1,197.5143502Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,351.6143510Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin)\$847.5243520Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)\$688.6243605Biopsy Of Stomach, By Laparotomy\$746.5243610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$315.9443611Excision, Local; Malignant Tumor Of Stomach\$1,086.0343620Gastrectomy, Total; With Esophagoenterostomy\$1,750.5243621Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.72			\$1,798.86
43499 Unlisted Procedure, Esophagus 43500 Gastrotomy With Exploration Or Foreign Body Removal; 43501 Gastrotomy; With Suture Repair Of Bleeding Ulcer 43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg. Mallory-Weiss) 43510 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg. Mallory-Weiss) 43510 Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg. Celestin Or Mousseaux-Barbin) \$8475.55 43520 Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation) \$688.69 43610 Excision, Local; Ulcer Or Benign Tumor Of Stomach 43611 Excision, Local; Ulcer Or Benign Tumor Of Stomach 43620 Gastrectomy, Total; With Esophagoenterostomy \$1,750.55 43621 Gastrectomy, Total; With Roux-En-Y Reconstruction			\$679.30
43500 Gastrotomy With Exploration Or Foreign Body Removal; \$701.33 43501 Gastrotomy; With Suture Repair Of Bleeding Ulcer \$1,197.54 43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) \$1,351.64 43510 Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin) \$847.55 43520 Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation) \$688.05 43605 Biopsy Of Stomach, By Laparotomy \$746.55 43610 Excision, Local; Ulcer Or Benign Tumor Of Stomach \$15.98 43611 Excision, Local; Malignant Tumor Of Stomach \$1,086.05 43620 Gastrectomy, Total; With Esophagoenterostomy \$1,750.55 43621 Gastrectomy, Total; With Roux-En-Y Reconstruction \$2,002.75		i ü ü i	
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43502Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,351.6i43510Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin)\$847.5i43520Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)\$688.6i43605Biopsy Of Stomach, By Laparotomy\$746.5i43610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$815.9i43611Excision, Local; Malignant Tumor Of Stomach\$1,765.5i43620Gastrectomy, Total; With Esophagoenterostomy\$1,750.5i43621Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.7i		i i i	
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43611 Excision, Local; Malignant Tumor Of Stomach \$1,086.00 43620 Gastrectomy, Total; With Esophagoenterostomy \$1,750.50 43621 Gastrectomy, Total; With Roux-En-Y Reconstruction \$2,002.70			
43620 Gastrectomy, Total; With Esophagoenterostomy \$1,750.5 43621 Gastrectomy, Total; With Roux-En-Y Reconstruction \$2,002.7			
43621 Gastrectomy, Total; With Roux-En-Y Reconstruction \$2,002.72			\$1,086.07
			\$1,750.51
43622 Gastrectomy, Total; With Formation Of Intestinal Pouch, Any Type \$2,036.49			\$2,002.72
	43622	Gastrectomy, Total; With Formation Of Intestinal Pouch, Any Type	\$2,036.45

18351 Patrial Removal O'Somant, Will Gastendamontomy 18362 Patrial Removal O'Somant, Will Gastendamontomy 18362 Patrial Removal O'Somant, Will Gastendamontomy 18362 Patrial Removal O'Somant, Will Gastendamontomy 18363 Vagotomy, Patrial Data (Vill Rou-En-Y Reconstruction 18364) Vagotomy Anne Petrome Will Train Data Gastractomy, but Separately in Addition To Code(S) For Printing Procedure) 18369 Vagotomy Anne Petrome Will Train Data Gastractomy, but Separately in Addition To Code(S) For Printing Procedure) 18369 Vagotomy Anne Petrome Will Train Data Gastractomy, but Separately in Addition To Code(S) For Printing Procedure) 18369 Vagotomy Anne Petrome Will Train Data Gastractomy, but Separately in Addition To Code(S) For Printing Procedure) 18369 Vagotomy Anne Petrome Will Train Data Gastractomy, but Separately of Agent Separately and Separately Vagotomy Anne Petrome Vill Train Data Separately Vagotomy Anne Petrome Vill Vagotomy An	A I .	Ta	
49325 Partial Removal Of Stamuth, Will Glassing Reproductives 49325 Arabid Removal Of Stamuth Will Consider Of Prince 49325 Parial Removal Of Stamuth Will Consider Of Prince 49325 Parial Removal Of Stamuth Will Consider Of Prince 49325 Parial Removal Of Stamuth Will Consider Of Prince 49325 Parial Removal Of Stamuth Will Consider Of Prince 49325 Parial Removal Of Stamuth Will Consider Of Prince 49325 Parial Removal Of Stamuth Prince 49325 Parial Removal Of Stamuth Prince 49325 Parial Removal Of Prince 4			Fee \$1,261,01
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49334 Position Provinced Of Stanoach Will. Cestation of Drusch 49358 Vagostory Will Performed Will Province Dates and Control			
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4,9841 Laparoscopy, Surgiant, Gazlac Restrictive Procedure, Win Gazlac Bypass Ann Rouz Enr V Gestromirationtry (Roux Limb 150 Cm Of Less) \$ 1,794 4,944 4,9			\$1,059.05
43044 Laparoscopy, Surgicial, Castric Restrictive Proceedure. With Castric Bypass And Roov-En-Y Gastroenterostomy (Roux Limb 150 Cm Or Less) 43,724 43045 Laparoscopy, Surgicial, Castric Restrictive Procedure. With Gastric Bypass And Small triestine Reconstitution To Limb Absorption 51,327 43047 Laparoscopy, Surgicial, Transaction Of Replacement of Castric Neurosciental Executions, Anthron 52,427 43051 Laparoscopy, Surgicial, Transaction Of Vigual Nerves. Funcial 43051 Laparoscopy, Surgicial, Transaction Of Vigual Nerves. Funcial 43052 Laparoscopy, Surgicial, Transaction Of Vigual Nerves. Recitation of Proceedings of Proceedings (Astronomy), Surgicial Transaction Of Vigual Nerves. Recitation of Statistics of Statistics (Astronomy), Surgicial Transaction Of Vigual Nerves. Science Of Highly Societive 43052 Laparoscopy, Surgicial, Transaction Of Vigual Nerves. Science Of Highly Societive 43055 United all aparoscopy Procedure. Science Of Highly Societive 43075 United Laparoscopy Procedure. Science Of Highly Societive Castric Office (Astronomy), Societive Office (Astronomy), Using An Endoscope 43076 United Laparoscopy. Surgicial Transaction Office (Astronomy), Nation Of			\$1,070.97
43956 [Laparoscoy, Surgeal, Canter Restrictive Procedure, With Gastre Bypass And Small Intensive Reconstruction To Limit Absorption 31,324 43646 [Laparoscoy, Surgeal, Revision Of Replacement Of Gastre Neurostimulator Electrodes, Anthrum 56,66 43646 [Laparoscoy, Surgeal, Revision Of Removal Of Gastre Neurostimulator Electrodes, Anthrum 56,66 43656 [Laparoscoy, Surgeal, Revision Of Vapan, Neuros, Electrodes Of Highly Selection 56, 200, 200, 200, 200, 200, 200, 200, 20	1001	regionly movement in the remaining of the second se	ψ1,070.01
43956 [Laparoscoy, Surgeal, Canter Restrictive Procedure, With Gastre Bypass And Small Intensive Reconstruction To Limit Absorption 31,324 43646 [Laparoscoy, Surgeal, Revision Of Replacement Of Gastre Neurostimulator Electrodes, Anthrum 56,66 43646 [Laparoscoy, Surgeal, Revision Of Removal Of Gastre Neurostimulator Electrodes, Anthrum 56,66 43656 [Laparoscoy, Surgeal, Revision Of Vapan, Neuros, Electrodes Of Highly Selection 56, 200, 200, 200, 200, 200, 200, 200, 20	43644	Laparoscopy, Surgical, Gastric Restrictive Procedure: With Gastric Bypass And Roux-En-Y Gastroenterostomy (Roux Limb 150 Cm Or Less)	\$1,784.91
48457 Lapraroscoys, Surgical, Revision for Reports of Casterio Neurostimulator Electrodes, Antum 48568 (Alparoscoys, Surgical, Revision of Removal of Clasterio Neurostimulator Electrodes, Antum 48568 (Alparoscoys, Surgical, Transaction Of Viagua Navies, Studented Or Highly Salective 48585 (Alparoscoys, Surgical, Transaction Of Viagua Navies, Studented Or Highly Salective 48568 (Alparoscoys, Surgical, Transaction Of Viagua Navies, Studented Or Highly Salective 48569 (Alparoscoys, Surgical, Transaction Of Viagua Navies, Studented Or Highly Salective 48569 (Alparoscoys) Studented Lapracoccopy Procedure, Studented Or Highly Salective 48576 (Alparoscoys) Studented Casterio C			\$1,907.51
43646 Laparoscopy, Surgiack Revision Of Removal Of Caristic Neutroinshulator Electrodes, Anturn 4365 Laparoscopy, Surgiack Transaction Of Vigus Nerves, Selective OF Highly Selective 5363 4365 Carelation Of Surgiach Conner from Storach To Selective OF Highly Selective 5363 4365 Carelation Of Surgiach Conner from Storach To Selective OF Highly Selective 7365 United Laparoscopy Procedure, Storach 7365 District Of Storach Conner Storach 7365 District Of Storach Conner Storach 7365 District Of Storach Town Adaptations Of Starter Contents 7375 Insention Of Storach Tube And Multiple Springer Contents 7375 Insention Of Storach Tube And Multiple Appriators Of Storach Contents 7376 Disgrossic Insention Of Storach Tube And Multiple Appriators Of Storach Analysis 7376 Disgrossic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance 7387 Disgrossic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance 7387 Disgrossic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To 7376 Disgrossic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance 7387 Disgrossic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To 7387 Disgrossic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To 7387 Disgrossic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance 7387 Replacement Of Storach Storach Tube Ancessed Through Storach 7387 Replacement Of Storach Storach Tube Ancessed Through Storach 7387 Replacement Of Storach Storach Tube Ancessed Through Storach 7387 Selection Development Of Storach Storach Storach Storach 7387 Laparoscopy, Surgiach, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only 7398 Disprossopy, Surgiach, Gastric Restrictive P			\$1,242.70
49651 Laparoscopy, Surgical, Transaction Of Vagus Nerves, Selective Or Highly Selective 98053 490550 Centelon Of Surgical Characterion Of Vagus Nerves, Selective Or Highly Selective 98054 980550 Unified Laparoscopy Procedure, Somach 19727 Insafron Of Somach Under Trough Nose of Middle Langer Puroscopic Guidance 98054 19727 Insafron Of Somach Under Trough Nose of Middle Langer Puroscopic Guidance 98057 19747 Gastric Insafron Of Somach Under Trough Nose of Middle Langer Somach 19758 Secretions 98057 19756 Secretions Of Somach Tube And Muliple Aspirations of Stormach Comients After Administration Of Drugs To Stimulate Stormach 19756 Secretions 98057 19757 Secretions Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance 98057 19757 Secretions Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To Stimulate Participation of Collection Using Imaging Guidance After Administration Of Drugs To Stimulate Participation Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To Stimulate Participation Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To Start Secretions 98057 19807 Repositions of Science Science Through Stem Of Mouth 98057 19807 Repositions of Science Science Through Stem Of Mouth 98057 19807 Repositions of Science Science Through Stem Vita Reposition Of Storma Opening 19807 Laparoscopy, Surgical, Gastric Restrictive Procedure, Revision Of Adjustable Gastric Restrictive Device Component Only 19808 Science			\$659.57
4355C Ceation Of Surgiand Copining Form Storach To Skin (Satestosmy) Usery (Satestosm			\$588.16
48855 Unifested Laptercoccopy Procedure, Semanth S871 43955 Unifested Laptercoccopy Procedure, Semanth Phile by Rev Asset 43752 Insention Of Stormach Tube And Applianch or Greater Contents \$40 43752 Insention Of Stormach Tube And Applianch or Greater Contents \$21 43764 Gaster Insulation And Aspiration, Disgosates, Grigle Specimen (Eg. Acid Analysis) \$21 43764 Gaster Insulation And Aspiration, Disgosates, Grigle Specimen (Eg. Acid Analysis) \$22 43765 Schoolson \$22 43766 Disgosatic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance \$22 43767 Standard Pancreatic Of Calibidader Secretions \$32 43767 Standard Pancreatic Of Calibidader Secretions \$32 43767 Repositioning Of Stormach Feeding Tube Insented Through Nose or Mouth \$12 43767 Repositioning Of Stormach Feeding Tube Insented Through Nose or Mouth \$12 43767 Repositioning Of Stormach Feeding Tube Insented Through Nose or Mouth \$12 43770 Subcolarenceus Port Components \$34 43771 Laparascopy, Surgical, Gastric Restrictive Procedure, Revision Of Adjustable Gastric Restrictive Device Component Only \$1,108 43771 Laparascopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only <td></td> <td></td> <td>\$683.76</td>			\$683.76
48659 Unilised Laparoscopy Procedure, Stomach Pice By Reg 18750 [Insertion Of Stomach Tube Procedure, Nose of Nouth Using Fluoroscopic Guidance 48750 [Insertion Of Stomach Tube And Aspirations Of Gastric Contents Diagnosis (Prestrict Of Stomach Tube And Aspirations Of Gastric Contents Diagnosis (Prestrict Of Stomach Tube And Multips Aspirations Of Stomach Contents After Administration Of Drugs To Stimulate Stomach Diagnosis (Prestrict Of Stomach Tube And Multips Aspirations Of Stomach Contents After Administration Of Drugs To Stimulate Stomach Diagnosis (Prestrict Of Tube Into Upper Strail Bowed And Specimen Collection Using Imaging Guidance Diagnosis (Prestrict Of Tube Into Upper Strail Bowed And Specimen Collection Using Imaging Guidance Diagnosis (Prestrict Of Tube Into Upper Strail Bowed And Specimen Collection Using Imaging Guidance After Administration Of Drugs To 43761 [Repositioning Of Stomach Feeding Tube Inserted Through Rose of Mount 43776 [Replacement Of Stomach Stomat Tube Accessed Through Stim With Revision Of Stoma Opening Laparoscopy, Surgical, Gastric Restrictive Procedure, Revision Of Adjustable Gastric Restrictive Device (Eg. Gastric Band And Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal And Adjustable Gastric Restrictive Device Component Only 43772 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal And Adjustable Gastric Restrictive Device Component Only 43772 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only 43772 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only 43773 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only 43774 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only 43775 Laparoscopy, Surgical, Gastric Restri			
43752 Insertion Of Stomach Tube Through Nose Or Mouth Using Fluorescepts Guidance 43764 Gastric Intubation And Aspirations Of Startic Contents 5376 Insertion Of Stomach Tube And Aspirations Of Startic Contents 5376 Gastric Intubation And Aspirations, Diagnostic Single Specimen (Eg. Acid Analysis) 5325 Diagnostic Insertion Of Stomach Tube And Multiple Aspirations Of Stomach Contents After Administration Of Drugs To Stimulate Stomach 5376 Diagnostic Insertion Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance 5376 Strutiate Plancinstic Or Galbiaddris Searchine Reveal And Specimen Collection Using Imaging Guidance After Administration Of Drugs To 5376 Replacement Of Stomach Stoma Tube Accessed Through Sich Work 5376 Replacement Of Stomach Stoma Tube Accessed Through Sich Work 5376 Replacement Of Stomach Stoma Tube Accessed Through Sich Work 5376 Replacement Of Stomach Stoma Tube Accessed Through Sich Will Revision Of Stomach Device (Eg. Gastric Band And 53771 Stoutions Plancins Tube Accessed Through Sich Will Revision Of Stomach Opening 5378 Replacement Of Stomach Stoma Tube Accessed Through Sich Will Revision Of Stomach Device (Eg. Gastric Band And 53771 Subcolarement Of Stomach Stoma Tube Accessed Through Sich Will Revision Of Stomach Device (Eg. Gastric Band And 53771 Subcolarement Of Stomach Stoma Tube Accessed Through Sich Will Revision Of Stomach Opening 53772 Lapanoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only 53773 Lapanoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only 53774 Lapanoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only 53775 Lapanoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only 53787 Lapanoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only 53787 Lapanoscopy,			
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Dagnostic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To 3276 13776 Similarle Pancreatio Of Selfublader Secretions 1 5226 1376 Repositioning Of Stomach Feeding Tube Insented Through Nose Or Mouth 1 52678 Replacement Of Stomach Stomar Tube Accessed Through Skin With Revision Of Stoma Opening 3246 13763 Replacement Of Stomach Stomar Tube Accessed Through Skin With Revision Of Stoma Opening 3240 Laparoscopy, Surgical, Gastric Restrictive Procedure; Reveneror Ind. Adjustable Gastric Restrictive Device (Eg. Gastric Band And 13770 Subcutaneous Port Components) 51.005 13711 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only 51.138 13772 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only 5244 13773 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only 534474 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only 53474 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only 53474 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Subcutaneous Port Components 53454 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Subcutaneous Port Components 534500 Privrogated Castric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Components 53450 Privrogated Castric Restrictive Procedure, Virbus Castric Procedure, Virbus			\$201.61
43767 Reposition Of Stimusch Feeding Tuble Insented Through Nose Or Mouth \$126 43768 Reposition of Of Stimusch Storma Tuble Accessed Through Stim \$24 43768 Reposition of Of Stimusch Storma Tuble Accessed Through Stim \$24 43768 Reposition of Of Stormach Storma Tuble Accessed Through Stim Will Revision Of Storma Opening \$340 4377 Laparoscopy, Surgical, Gastric Restrictive Procedure, Revision Of Adjustable Gastric Restrictive Device (Eg. Gastric Band And \$1,005 4377 Laparoscopy, Surgical, Gastric Restrictive Procedure, Revision Of Adjustable Gastric Restrictive Device Component Only \$1,138 4377 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 4377 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 4377 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 4377 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 4378 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 4377 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only \$1,109	43756		\$281.61
43761 Repositioning Of Stomach Feeding Tube Inserted Through Nose Or Mouth \$245 43762 Replacement Of Stomach Stoma Tube Accessed Through Skin With Revision Of Stoma Opening \$246 43763 Replacement Of Stomach Stoma Tube Accessed Through Skin With Revision Of Stoma Opening \$340 43770 Subcutameous Port Components) \$1,050 43771 Quantification Components) \$1,050 43772 Lapaniscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 43772 Lapaniscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 43774 Lapaniscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 43775 Lapaniscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,437 43776 Lapaniscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,437 43777 Lapaniscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,437 43778 Lapaniscopy, Surgical, Gastric Restrictive Procedure; \$1,637	40		* :-
43762 Replacement Of Stomed Stoma Tube Accessed Through Skin Wiln Revision Of Stoma Opening 43763 Replacement Of Stomed Stoma Tube Accessed Through Skin Wiln Revision Of Stoma Opening 43763 Replacement Of Stomed Stoma Tube Accessed Through Skin Wiln Revision Of Stoma Opening 43770 Subcutaneous Port Components) 51,005 43771 Usparoscopy, Surgical, Gastric Restrictive Procedure; Revision Of Adjustable Gastric Restrictive Device Component Only 51,138 43772 Laparoscopy, Surgical, Gastric Restrictive Procedure; Revision Of Adjustable Gastric Restrictive Device Component Only 58,144 43773 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only 58,144 43773 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only 58,144 43774 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only 58,144 43775 Laparoscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastric Component Only 58,1079 58,107			\$376.46
43763 Aepiscement Of Stomach Stoma Tube Accessed Through Skin With Revision Of Stoma Opening Laparoscopy, Surgical, Gastric Restrictive Procedure; Resement Of Adjustable Gastric Restrictive Device (Eg., Gastric Band And \$1,005 43771 Laparoscopy, Surgical, Gastric Restrictive Procedure; Revision Of Adjustable Gastric Restrictive Device Component Only \$1,138 43772 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 43772 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 43774 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 43775 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 43776 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Subcutaneous Port Components \$1,138 43776 Laparoscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (le. Sleeve Gastrectomy) \$1,007 43800 Pyloroplasty \$1,007 43810 Gastrododenostomy \$1,007 43810 Gastrododenostomy \$1,007 43810 Gastrododenostomy \$1,118 43820 Gastric Japaroscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (le. Sleeve Gastrectomy) \$1,118 43821 Gastric Restrictive Procedure; Without Construction Of Gastric Tube \$1,124 43831 Insertion Of Stomach Feeding Tube, Open Procedure in Provedom Feeding \$1,256 43831 Insertion Of Stomach Feeding Tube, Open Procedure For Newhork Procedure \$1,256 43840 Suttra Cheristricker Procedure; Without Gastric Bypass, For Morbid Obesity; Vertica-Banded Gastroplasty \$1,375 43840 Suttra Cheristricker Procedure; Without Gastric Bypass, For Morbid Obesity; Vertica-Banded Gastroplasty \$1,376 43840 Suttra Cheristricker Procedure; Without Gastric Bypass, For Morbid Obesity; Vertica-Banded Gastroplasty \$1,376 43840 Suttra Cheristricker Procedure; Without Gastric			\$126.49
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43770 Subcutaneous Port Components) \$1.005 43771 Laparoscopy, Surgical, Sastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only \$1.138 43772 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only \$3.44 43773 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only \$1.138 43774 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Subcutaneous Port Components 18, 104 \$1.04 43775 Laparoscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (fe, Sieeve Gastrectomy) \$1.07 43800 Pyloroplasty \$1.07 43810 Gastrodoudenostomy \$9.03 43820 Partial Removal Of Stomach, Wilhout Vagotomy \$1.118 43826 Gastrolipourostomy; With Vagotomy, Any Type \$1.118 43831 Insertion Of Stomach Feeding Tube, Open Procedure For Newborn Feeding \$5.55 43832 Classific Restrictive Procedure, Wilhout Gastric Bypass, For Morbid Obesity; Vertical-Banded Gastroplasty \$1.14 43840 Suture Of Perforated Ulex, Wilhout Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty \$1.17 43841 Gastric Restrictive Procedure, Wilhout Gastric Bypass, For Morbid Obesity; Vertical-Banded Gastroplasty \$1.12	43763		\$340.65
43771 Laparoscopy, Surgical. Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1.138 43772 Laparoscopy, Surgical. Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1.138 43773 Laparoscopy, Surgical. Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1.138 43774 Laparoscopy, Surgical. Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Subcutaneous Port Components \$3824 43775 Laparoscopy, Surgical. Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy) \$1.138 43774 Laparoscopy, Surgical. Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy) \$1.138 43775 Laparoscopy, Surgical. Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy) \$1.138 43775 Laparoscopy, Surgical. Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy) \$1.138 43775 Laparoscopy, Surgical. Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy) \$1.138 43776 Laparoscopy, Surgical. Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy) \$1.138 43820 Parital Removal Of Stomach, Wilhout Vagotomy \$1.138 43820 Parital Removal Of Stomach Pedeling Tube. Open Procedure Procedure \$1.138 43821 Gastric Restrictive Procedure, Wilhout Gastric Bytess, For Morbid Obesity, Vertical-Banded Gastroplasty \$1.141 43825 Parital Removal Of Stomach, Wilh Gastroenterostomy \$1.144 43826 Parital Removal Of Stomach, Wilh Gastroenterostomy \$1.144 43827 Parital Removal Of Stomach, Wilh Gastroenterostomy \$1.144 43827 Parital Removal Of Stomach, Stomach Bytess, For Morbid Obesity, Other Than Vertical-Banded Gastroplasty \$1.144 43826 Parital Removal Of Stomach Spass, Open Procedure \$1.14880 Parital Removal Of Stomach St			
Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 43773 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only \$1,138 43774 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Suboutaneous Port Components \$854 43775 Laparoscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (ie. Sleeve Gastrectomy) \$1,707 43800 Phiproplasty \$1,707 43800 Phiproplasty \$1,707 43800 Phiproplasty \$1,118 43810 Gastroicoudenostomy \$2,903 43820 Partial Removal Of Stomach, Without Vagotomy, \$1,118 43825 Gastrojejunostomy, With Vagotomy, Any Type \$1,118 43825 Gastrojejunostomy, With Vagotomy, Any Type \$1,118 43830 Insention Of Stomach Feeding Tube, Open Procedure, Without Construction Of Gastric Tube \$3505 43831 Baselino Of Stomach Feeding Tube, Open Procedure For Newborn Feeding \$3503 43832 Creation Of Stomach Feeding Tube, Open Procedure For Newborn Feeding \$3503 43840 43840 43840 43840 43841			\$1,005.69
43773 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only 43774 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Subcutaneous Port Components 43774 Laparoscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy) 53.079 53000 Pyloroplasty 53001 Pyloroplasty 53001 Pyloroplasty 53001 Pyloroplasty 53002 Pyloroplasty 53003 Pylorop			\$1,138.56
43774 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Subcutaneous Port Components 43775 Laparoscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy) 51,179 43810 Potropisch 52701 53800 Pytoropisch 53001	43772	Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only	\$844.94
43774 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Subcutaneous Port Components 43775 Laparoscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy) 51,179 43810 Potropisch 52701 53800 Pytoropisch 53001			
1,1775 Saproscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy) \$1,079	43773	Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only	\$1,138.56
1,1775 Saproscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy) \$1,079			
43800 Pyloroplasty 43810 Gastroiduodenostomy 43820 Partial Removal Of Stomach, Without Vagotomy 43820 Sastroiduodenostomy 43825 Gastroiduodenostomy 43825 Gastroiduodenostomy 43826 Gastroiduodenostomy 43826 Sastroiduodenostomy 43826 Sastroiduodenostomy 43827 Sastroiduodenostomy 43827 Sastroiduodenostomy 43827 Sastroiduodenostomy 43828 Sastroiduodenostomy 43829 Sastroiduodenostomy 43820 Sastroiduodenostomy			\$854.54
43810 [Sastroduodenostomy	43775	Laparoscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy)	\$1,079.18
St.118	43800	Pyloroplasty	\$701.09
43825 Gastrojejunostomy; With Vagotomy, Any Type	43810	Gastroduodenostomy	\$903.08
43830 Insertion Of Stomach Feeding Tube, Open Procedure, Without Construction Of Gastric Tube \$505 43831 Insertion Of Stomach Feeding Tube, Open Procedure For Newborn Feeding \$553 43840 Suture Of Ferforated Uicer, Wound, Or Injury Of Stomach Or Upper Small Bowel \$885 43840 Suture Of Perforated Uicer, Wound, Or Injury Of Stomach Or Upper Small Bowel \$885 43840 Suture Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty \$1,137 43841 Sarkin Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty \$1,141 43845 Partial Removal Of Stomach, With Gartial Gastrectomy \$2,008 43846 Partial Removal Of Stomach, With Gastroenterostomy \$1,466 43847 Partial Removal Of Stomach, With Gastroenterostomy \$1,609 43848 Revision Of Upper Stomach Bypass, Open Procedure \$1,009 43848 Revision Of Hubberner Of Stomach To Small Bowel, With Vagotomy \$1,275 43850 Closure Of Gastrocolic Fistula \$1,420 43880 Closure Of Gastrocolic Fistula \$1,420 43881 Replacement Of Stomach To Small Bowel, With Vagotomy \$1,221 43882 Removal Of Stimulator Electrodes in Upper Stomach, Open Procedure \$322 43880 Revision Of Or Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure	43820	Partial Removal Of Stomach, Without Vagotomy	\$1,118.57
43831 Insertion Of Stomach Feeding Tube, Open Procedure For Newborn Feeding \$553 43832 Creation Of Stomach Feeding Tube, Open Procedure \$928 43840 Suture Of Perforated Uicer, Wound, Or Injury Of Stomach Or Upper Small Bowel \$885 43840 Suture Of Perforated Uicer, Wound, Or Injury Of Stomach Or Upper Small Bowel \$885 43843 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty \$1,141 43846 Partial Removal Of Stomach, With Partial Gastrectomy \$2,008 43847 Partial Removal Of Stomach, With Gastroenterostomy \$1,603 43848 Partial Removal Of Stomach, With Small Intestine Repair \$1,603 43848 Revision Of Atlachment Of Stomach, With Small Intestine Repair \$1,603 43849 Revision Of Atlachment Of Stomach To Small Bowel, Without Vagotomy \$1,275 43850 Revision Of Atlachment Of Stomach To Small Bowel, With Vagotomy \$1,512 43870 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy) \$5,22 43880 Revision Of Atlachment Of Stomach To Small Bowel, With Vagotomy \$1,512 43881 Replacement Of Stimulator Electrodes in Upper Stomach, Open Procedure \$1,420 43882 Removal Of Stumulator Electrodes in Upper Stomach, Open Procedure \$3,22 43888 Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding De	43825	Gastrojejunostomy; With Vagotomy, Any Type	\$1,164.18
43831 Insertion Of Stomach Feeding Tube, Open Procedure For Newborn Feeding \$553 43832 Creation Of Stomach Feeding Tube, Open Procedure \$928 43840 Suture Of Perforated Uicer, Wound, Or Injury Of Stomach Or Upper Small Bowel \$885 43840 Suture Of Perforated Uicer, Wound, Or Injury Of Stomach Or Upper Small Bowel \$885 43843 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty \$1,141 43846 Partial Removal Of Stomach, With Partial Gastrectomy \$2,008 43847 Partial Removal Of Stomach, With Gastroenterostomy \$1,603 43848 Partial Removal Of Stomach, With Small Intestine Repair \$1,603 43848 Revision Of Atlachment Of Stomach, With Small Intestine Repair \$1,603 43849 Revision Of Atlachment Of Stomach To Small Bowel, Without Vagotomy \$1,275 43850 Revision Of Atlachment Of Stomach To Small Bowel, With Vagotomy \$1,512 43870 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy) \$5,22 43880 Revision Of Atlachment Of Stomach To Small Bowel, With Vagotomy \$1,512 43881 Replacement Of Stimulator Electrodes in Upper Stomach, Open Procedure \$1,420 43882 Removal Of Stumulator Electrodes in Upper Stomach, Open Procedure \$3,22 43888 Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding De	43830	Insertion Of Stomach Feeding Tube, Open Procedure, Without Construction Of Gastric Tube	\$505.75
43840 Suture Of Perforated Ulcer, Wound, Or Injury Of Stomach Or Upper Small Bowel 43840 Suture Of Perforated Ulcer, Wound, Or Injury Of Stomach Or Upper Small Bowel 43841 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Vertical-Banded Gastroplasty 51,147 43843 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty 51,141 43845 Partial Removal Of Stomach, With Partial Gastrectomy 52,008 43846 Partial Removal Of Stomach, With Small Intestine Repair 51,466 43847 Partial Removal Of Stomach, With Small Intestine Repair 51,603 52,008 53,603 53,			\$553.43
43840 Suture Of Perforated Ulcer, Wound, Or Injury Of Stomach or Upper Small Bowel \$885 43842 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity, Vertical-Banded Gastroplasty \$1,375 43843 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity, Other Than Vertical-Banded Gastroplasty \$1,414 43845 Partial Removal Of Stomach, With Partial Gastrocentrostomy \$2,008 43846 Partial Removal Of Stomach, With Sartonetrostomy \$1,466 43847 Partial Removal Of Stomach, With Sartonetrostomy \$1,603 43848 Revision Of Upper Stomach Bypass, Open Procedure \$1,603 43860 Revision Of Attachment Of Stomach Bypass, Open Procedure \$1,275 43860 Revision Of Attachment Of Stomach Bypass, Open Procedure \$1,512 43870 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy) \$1,512 43870 Closure Of Surgically Created Opening From Stomach, Open Procedure \$3,901 43881 Replacement Of Stimulator Electrodes In Upper Stomach, Open Procedure \$3,901 43882 Removal Of Stimulator Electrodes In Upper Stomach, Open Procedure \$3,328 43887 Removal Of Stimulator Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$3,328 43887 Removal Of Stimulator Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$3,328 43887 Remov			\$928.59
43842 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Vertical-Banded Gastroplasty \$1,375 43843 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty \$1,141 43845 Partial Removal Of Stomach, With Partial Gastrectomy \$2,008 43846 Partial Removal Of Stomach, With Bastroenterostomy \$1,460 43847 Partial Removal Of Stomach, With Gastroenterostomy \$1,460 43848 Revision Of Upper Stomach Bypass, Open Procedure \$1,710 43860 Revision Of Upper Stomach Bypass, Open Procedure \$1,710 43860 Revision Of Attachment Of Stomach To Small Bowel, Without Vagotomy \$1,127 43860 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy) \$1,275 43870 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy) \$1,275 43870 Closure Of Surgically Created Opening From Stomach, Open Procedure \$3,1420 43881 Replacement Of Stimulator Electrodes in Upper Stomach, Open Procedure \$3,243 43887 Removal Of Stimulator Electrodes in Upper Stomach, Open Procedure \$3,243 43888 Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$3,243 43888 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$3,244 43888 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$3,224 43888 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$4,242 43888 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$4,242 43888 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$4,242 43888 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$4,242 43888 Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$4,242 44,244 44,245 Revision Of Open Revision Stomach 44,245 Revision Of Open Revision Stom		ů i	\$885.40
43843 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty \$1,141 43845 Partial Removal Of Stomach, With Partial Gastrectomy \$2,008 43846 Partial Removal Of Stomach, With Gastroenterostomy \$1,466 43847 Partial Removal Of Stomach, With Gastroenterostomy \$1,466 43847 Partial Removal Of Stomach, With Gastroenterostomy \$1,466 43847 Partial Removal Of Stomach, With Small Intestine Repair 43868 Revision Of Upper Stomach Bypass, Open Procedure 43868 Revision Of Attachment Of Stomach To Small Bowel, Without Vagotomy \$1,275 43866 Revision Of Attachment Of Stomach To Small Bowel, Without Vagotomy \$1,275 43866 Revision Of Attachment Of Stomach To Small Bowel, Without Vagotomy \$1,275 43860 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy) \$522 43860 Closure Of Gastrocolic Fistula \$1,420 43881 Replacement Of Stimulator Electrodes In Upper Stomach, Open Procedure \$322 43882 Removal Of Stimulator Electrodes In Upper Stomach, Open Procedure \$336 43887 Removal Of Forn Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$322 43888 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$322 43999 Unlisted Procedure, Stomach Unlisted Pro			\$1,375.25
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### 44021 Enterotomy, Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube) #### 5864 ### 44025 Enterotomy With Exploration Or Foreign Body Removal; Large Bowel			\$137.42
### Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies \$875 ###################################			\$811.22
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44100 Biopsy Of Small Bowel By Capsule Attached To Tube Passed Through Mouth \$97 44110 Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Single Enterotomy \$762 44111 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies \$875 44120 Partial Removal Of Small Bowel, Single Resection And Connection \$1,057 44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection \$234			\$768.22
44110 Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Single Enterotomy \$762 44111 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies \$875 44120 Partial Removal Of Small Bowel, Single Resection And Connection \$1,057 44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection \$234			\$1,492.64
44111 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies \$875 44120 Partial Removal Of Small Bowel, Single Resection And Connection \$1,057 44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection \$234	44100	Biopsy Of Small Bowel By Capsule Attached To Tube Passed Through Mouth	\$97.67
44111 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies \$875 44120 Partial Removal Of Small Bowel, Single Resection And Connection \$1,057 44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection \$234			
44111 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies \$875 44120 Partial Removal Of Small Bowel, Single Resection And Connection \$1,057 44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection \$234		Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization, Single Enterotomy	\$762.13
44120Partial Removal Of Small Bowel, Single Resection And Connection\$1,05744121Partial Removal Of Small Bowel, Each Additional Resection And Connection\$234	<u>4</u> 4110	Exolori of one of more zoolene of official of zarge income from requiring function one, zarone inzarion, of finding zarone in the contraction,	
44120Partial Removal Of Small Bowel, Single Resection And Connection\$1,05744121Partial Removal Of Small Bowel, Each Additional Resection And Connection\$234	44110	Ended of the State of	
44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection \$234			\$875.86
	4411	Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies	\$875.86 \$1,057.35
<u></u>	4411 ²	Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies Partial Removal Of Small Bowel, Single Resection And Connection	

Codo	Description	Fee
	Partial Removal Of Small Bowel To Correct Congenital Defect, Single Resection And Connection, Without Tapering	\$2,520.72
	Partial Removal Of Small Bowel To Correct Congenital Defect, Single Resection And Connection, With Tapering	\$2,923.62
44127	Fartan Nemoval of Small Bower to Confect Congenital Belect, Single Nesection And Confection, With Tapening	φ2,923.02
11120	Partial Removal Of Small Bowel To Correct Congenital Defect, Single Resection And Connection, Each Additional Resection And Connection	\$211.75
	Enteroenterostomy, Anastomosis Of Intestine, With Or Without Cutaneous Enterostomy (Separate Procedure)	\$919.31
	Partial Removal Of Donor Small Bowel For Transplantation, Open Procedure	Price By Report
	Intestinal Allotransplantation; From Living Donor	Price By Report
	Removal Of Transplanted Intestinal Allograft, Complete	\$1,352.27
44137	Mobilization (Take-Down) Of Splenic Flexure Performed In Conjunction With Partial Colectomy (List Separately In Addition To Primary	φ1,332.21
44120	Procedure)	¢117.06
	Partial Removal Of Large Bowel, With Connection	\$117.86 \$1,325.64
	Colectomy, Partial; With Skin Level Cecostomy Or Colostomy	\$1,446.47
	Colectomy, Partial; With End Colostomy And Closure Of Distal Segment (Hartmann Type Procedure)	
		\$1,315.90
	Colectomy, Partial; With Resection, With Colostomy Or Ileostomy And Creation Of Mucofistula	\$1,393.77
	Colectomy, Partial; With Coloproctostomy (Low Pelvic Anastomosis)	\$1,524.86
	Colectomy, Partial; With Coloproctostomy (Low Pelvic Anastomosis), With Colostomy	\$1,755.32
	Partial Removal Of Large Bowel, Abdominal And Transanal Approach	\$1,711.89
	Colectomy, Total, Abdominal, With Ileostomy Or Ileoproctostomy; Without Proctectomy	\$1,562.47
44151	Colectomy, Total, Abdominal, Without Proctectomy; With Continent Ileostomy	\$1,912.60
44155	Removal Of Large Bowel And Rectum And Creation Of Opening From End Of Small Intestine Through Wall Of Abdomen	\$1,693.78
	Removal Of Large Bowel And Rectum And Creation Of Opening From End Of Small Intestine Through Wall Of Abdomen, With Small Intestinal	
44156	Reservoir For Feces	\$2,045.75
	Colectomy, Total, Abdominal, With Proctectomy; With Ileoanal Anastomosis, Includes Loop Ileostomy, And Rectal Mucosectomy, When	•
44157	Performed	\$1,941.03
	Removal Of Large Bowel And Rectum With Attachment Of Small Bowel To Anus And Creation Of Small Bowel Reservoir	\$1,988.76
	Colectomy, Partial, With Removal Of Terminal Ileum With Ileocolostomy	\$1,228.00
	Laparoscopy, Surgical, Enterolysis (Freeing Of Intestinal Adhesion) (Separate Procedure)	\$945.42
	Creation Of Small Bowel Opening Using An Endoscope For Decompression Or Feeding	\$667.83
	Creation Of Small Bowel Opening Using An Endoscope, Non-Tube	\$1,128.38
	Laparoscopy, Surgical, Colostomy Or Skin Level Cecostomy	
		\$1,248.81
	Partial Removal Of Small Bowel Using An Endoscope, Single Resection And Connection	\$1,426.45
	Partial Removal Of Small Bowel Using An Endoscope, Each Additional Resection And Connection	\$233.68
	Laparoscopy, Surgical; Colectomy, Partial, With Anastomosis	\$1,592.28
	Laparoscopy, Surgical; Colectomy, Partial, With Removal Of Terminal Ileum With Ileocolostomy	\$1,387.76
	Laparoscopy, Surgical; Colectomy, Partial, With End Colostomy And Closure Of Distal Segment (Hartmann Type Procedure)	\$1,810.41
44207	Laparoscopy, Surgical; Colectomy, Partial, With Anastomosis, With Coloproctostomy (Low Pelvic Anastomosis)	\$1,898.04
44208	Laparoscopy, Surgical; Colectomy, Partial, With Anastomosis, With Coloproctostomy (Low Pelvic Anastomosis) With Colostomy	\$1,763.91
44210	Laparoscopy, Surgical; Colectomy, Total, Abdominal, Without Proctectomy, With Ileostomy Or Ileoproctostomy	\$1,590.83
	Laparoscopy, Surgical; Colectomy, Total, Abdominal, With Proctectomy, With Ileoanal Anastomosis, Creation Of Ileal Reservoir (S Or J), With	
44211	Loop Ileostomy, Includes Rectal Mucosectomy, When Performed	\$1,923.92
44212	Laparoscopy, Surgical; Colectomy, Total, Abdominal, With Proctectomy, With Ileostomy	\$2,129.45
	Laparoscopy, Surgical, Mobilization (Take-Down) Of Splenic Flexure Performed In Conjunction With Partial Colectomy (List Separately In	·
44213	Addition To Primary Procedure)	\$183.50
	Laparoscopy, Surgical, Closure Of Enterostomy, Large Or Small Intestine, With Resection And Anastomosis	\$1,725.79
	Unlisted Laparoscopy Procedure, Intestine (Except Rectum)	\$4,716.58
	Insertion Of Small Bowel Tube, Open Procedure	\$749.63
	lleostomy Or Jejunostomy, Non-Tube	\$959.09
	Release Of Superficial Scar Tissue From Surgically Created Opening Into Lower Small Bowel From Body Wall (Ileostomy)	\$396.02
	Revision Of Ileostomy; Complicated (Reconstruction In-Depth) (Separate Procedure) Continent Ileostomy (Kock Procedure) (Separate Procedure)	\$662.53 \$1.254.42
	Continent Ileostomy (Kock Procedure) (Separate Procedure) Colostomy Or Skin Level Cecostomy;	\$1,254.42
		\$785.75
_	Colostomy Or Skin Level Cecostomy; With Multiple Biopsies (Eg, For Congenital Megacolon) (Separate Procedure)	\$853.71
	Release Of Superficial Scar Tissue From Surgically Created Opening Into Large Bowel From Body Wall (Colostomy), Simple	\$415.47
	Reconstruction Of Large Bowel Opening, Complicated	\$941.19
	Revision Of Colostomy; With Repair Of Paracolostomy Hernia (Separate Procedure)	\$1,056.56
	Diagnostic Examination Of Small Bowel, Not Including Lower Small Intestine (Ileum), Using An Endoscope	\$145.85
44361	Biopsy Of Small Bowel Except The Ileum Using An Endoscope	\$161.25
44363	Removal Of Foreign Bodies From Small Bowel Not Including Lower Small Intestine (Ileum)	\$194.60
44364	Removal Of Small Bowel Polyps Or Growths Using An Endoscope, With An Electrical Cautery	\$186.69
	Removal Of Small Bowel Polyps Or Growths Using An Endoscope, With A Mechanical Snare	\$166.39
	Small Intestinal Endoscopy, Enteroscopy Beyond Second Portion Of Duodenum, Not Including Ileum; With Control Of Bleeding (Eg, Injection,	
44366	Bipolar Cautery, Unipolar Cautery, Laser, Heater Probe, Stapler, Plasma Coagulator)	\$243.32
		+= .5.02
44369	Destruction Of Tissue Abnormalities, Tumors, Or Polyps Of Small Bowel Not Including Lower Small Intestine (Ileum) Using An Endoscope	\$249.39
	Insertion Of Small Bowel Stent Using An Endoscope Above The Lower Small Bowel	\$243.65
	Insertion of Tube Into Middle Small Intestine (Jejunum), Accessed Through The Skin, Using An Endoscope	\$217.50
	Convert Stomach Tube To Tube In Middle Small Intestine (Jejunum), Accessed Through The Skin, Using An Endoscope	\$174.50
443/3		\$174.50
44070	Diagnostic Examination Of Small Bowel Including Lower Small Intestine (Ileum) With Collection Of Specimens By Brushing Or Washing, Using	фо го со
	An Endoscope	\$259.80
	Biopsy Of Small Bowel Including The Ileum Using An Endoscope	\$273.01
	Control Of Bleeding Of Small Bowel Including Lower Small Intestine (Ileum) With Biopsies, Using An Endoscope	\$351.47
44379	Insertion Of Small Bowel Stent Using An Endoscope Below The Lower Small Bowel	\$373.73
1	Diagnostic Examination Of Small Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Lower Small Bowel From Body	
44380	Wall (Ileostomy)	\$214.92
	Balloon Dilation Of Small Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Lower Small Bowel From Body Wall	
44381	(lleostomy)	\$991.31

Description Biopsies Of Small Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Lower Small Bowel From Body Wall	Fee
lleostomy)	\$219.71
nsertion Of Stent Into Small Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Lower Small Bowel From Body Wall	Ψ2.0
lleostomy)	\$140.34
Diagnostic Examination Of Surgically Created Pouch Of Small Bowel Including Lower Small Intestine (Ileum) Using An Endoscope	\$154.42
Biopsy Of Small Bowel Pouch Using An Endoscope	\$227.58
Diagnostic Examination Of Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall	
Colostomy)	\$339.71
Rionsies Of Large Rowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Rowel From Rody Wall (Colostomy)	\$445.90
	ψ-1-3.30
Sody Wall (Colostomy)	\$393.71
Control Of Bleeding Of Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall	
Colostomy)	\$635.86
	\$372.39
	\$473.73
	ψ473.73
nto Large Bowel From Body Wall (Colostomy)	\$2,447.91
nsertion Of Stent Into Large Bowel, Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall	
Colostomy)	\$239.07
	\$277.59
	\$415.61
	Ф415.61
Colostomy)	\$555.02
Ultrasound Examination Of Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall	***************************************
Colostomy)	\$209.60
Fine Needle Aspirations And/Or Biopsies Of Large Bowel With Ultrasound Guidance, Using An Endoscope Inserted Through Surgically Created	
, , , ,,	\$251.62

	\$211.35
	\$19.76 \$912.51
	\$1,433.04
	\$894.50
Suture Of Large Bowel Ulcer, Defect, Wound, Injury, Or Rupture With Creation Of Opening	\$1,155.89
ntestinal Stricturoplasty (Enterotomy And Enterorrhaphy) With Or Without Dilation, For Intestinal Obstruction	\$956.51
	\$671.50
losure Of Enterostomy, Large Or Small Intestine; With Resection And Anastomosis Other Than Colorectal	\$934.87
Classes Of Estandard Large On Small Intesting With Deposition And Colorada Assets Proping (F. Classes Of Ladrage T. T. Proposition	#4.000.04
	\$1,662.34 \$909.81
	\$939.91
	\$1,193.30
Closure Of Enterovesical Fistula; With Intestine And/Or Bladder Resection	\$1,374.53
ntestinal Plication, Complete (Noble Type Operation) (Separate Procedure)	\$955.22
xclusion Of Small Intestine From Pelvis By Mesh Or Other Prosthesis, Or Native Tissue (Eg, Bladder Or Omentum)	\$901.10
ntraoperative Colonic Lavage (List Separately In Addition To Code For Primary Procedure)	\$148.05
	Price By Report
	047.00
	\$317.89 \$238.76
	\$334.25
Small Bowel Procedure	Price By Report
Repair Of Congenital Bowel Defect	\$657.87
xcision Of Lesion Of Mesentery (Separate Procedure)	\$758.63
Suture Of Mesentery (Separate Procedure)	\$671.69
Procedure For Congenital Bowel Defect	Price By Report
Orainage Of Abscess Of Appendix, Open Procedure	\$700.29
Appendectomy;	\$635.95
Removal Of Appendix During Other Major Procedure	\$81.55
Appendectomy; For Ruptured Appendix With Abscess Or Generalized Peritonitis Laparoscopy, Surgical, Appendectomy	\$850.64 \$599.61
Jnlisted Laparoscopy Procedure, Appendix	\$1,593.86
Orainage Of Abscess In Pelvic Region Through Rectum	
Orainage Of Abscess In Pelvic Region Through Rectum Orainage Of Rectal Abscess, Superficial, Under The Rectal Lining	\$391.44 \$308.29
	\$391.44 \$308.29
Orainage Of Rectal Abscess, Superficial, Under The Rectal Lining	\$391.44
Orainage Of Rectal Abscess, Superficial, Under The Rectal Lining Incision And Drainage Of Abscess Above Pelvic Floor Or Behind Rectum Biopsy Of Anal And/Or Rectal Wall Via Anus Removal Of Muscle In The Anus And Rectum Area	\$391.44 \$308.29 \$521.96 \$224.31 \$338.39
Orainage Of Rectal Abscess, Superficial, Under The Rectal Lining Incision And Drainage Of Abscess Above Pelvic Floor Or Behind Rectum Biopsy Of Anal And/Or Rectal Wall Via Anus Removal Of Muscle In The Anus And Rectum Area Removal Of Rectum With Creation Of Large Bowel Opening, Open Abdominal And Rectal Procedure	\$391.44 \$308.29 \$521.96 \$224.31 \$338.39 \$1,579.48
Orainage Of Rectal Abscess, Superficial, Under The Rectal Lining Incision And Drainage Of Abscess Above Pelvic Floor Or Behind Rectum Biopsy Of Anal And/Or Rectal Wall Via Anus Removal Of Muscle In The Anus And Rectum Area Removal Of Rectum With Creation Of Large Bowel Opening, Open Abdominal And Rectal Procedure Partial Removal Of Rectum, Open Abdominal Procedure	\$391.44 \$308.29 \$521.96 \$224.31 \$338.39
Orainage Of Rectal Abscess, Superficial, Under The Rectal Lining Incision And Drainage Of Abscess Above Pelvic Floor Or Behind Rectum Biopsy Of Anal And/Or Rectal Wall Via Anus Removal Of Muscle In The Anus And Rectum Area Removal Of Rectum With Creation Of Large Bowel Opening, Open Abdominal And Rectal Procedure	\$391.44 \$308.29 \$521.96 \$224.31 \$338.39 \$1,579.48
	iopsies Of Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall (Colostomy) emoval Of Foreign Bodies From Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall (Colostomy) ontrol Of Bleeding Of Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall Colostomy) emoval Of Tissue Abnormalities, Tumors, Or Polyps Of Large Bowel By Hot Biopsy Forceps, Using An Endoscope Inserted Through urgically Created Opening Into Large Bowel From Body Wall (Colostomy) emoval Of Tissue Abnormalities, Tumors, Or Polyps Of Large Bowel By Share, Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall (Colostomy) estruction Of Tissue Abnormalities, Tumors, Or Polyps Of Large Bowel, Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel Colostomy) estruction Of Stort Into Large Bowel, Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall Colostomy) enroval Of Lining Of Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall Colostomy) elections Beneath Lining Of Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall Colostomy) elections Beneath Lining Of Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall Colostomy en Needle Aspirations And/Or Biopsies Of Large Bowel With Ultrasound Guidance, Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall Colostomy) into Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall Colostomy into Large Bowel With Ultrasound Guidance, Using An Endoscope Inserted Through Surgically Created Opening Into

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Code Description	Fee
45114 Partial Removal Of Rectum, Abdominal And Transsacral Approach 45116 Partial Removal Of Rectum, Abdominal Approach Only	\$1,606.26 \$1,403.93
Removal Of Rectum With Creation Of Small Intestinal Reservoir For Feces, Via Incision Of Abdomen And Region Between Thighs (Combined	\$1,403.93
45119 Abdominoperineal Approach)	\$1,711.14
Proctectomy, Complete (For Congenital Megacolon), Abdominal And Perineal Approach; With Pull-Through Procedure And Anastomosis (Eq.	Ψ1,711.11
45120 Swenson, Duhamel, Or Soave Type Operation)	\$1,420.53
45121 Removal Of Congenital Rectal Defect And Large Bowel With Multiple Biopsies, Open Abdominal And Rectal Procedure	\$1,521.95
45123 Partial Removal Of Rectum, Perineal Approach	\$1,148.69
45126 Removal Of Large Bowel, Rectum, Prostate, Urinary Structures And/Or Uterus And Cervix	\$2,468.77
45130 Repair Of Prolapsed Rectum, Perineal Approach	\$979.51
45135 Repair Of Prolapsed Rectum, Abdominal And Perineal Approach	\$1,181.68
45136 Excision Of Ileoanal Reservoir With Ileostomy	\$1,628.89
45150 Incision Of Stricture Of Rectum	\$383.28
45160 Removal Of Rectal Growth Through The Sacrum Or Tail Bone	\$915.01
45171 Removal Of Rectal Growth Through The Anus	\$632.27
45172 Removal Of Rectal Growth Through The Anus With Removal Of A Portion Of The Muscle	\$757.48
45190 Destruction Of Tumor Of Rectum Through Anus	\$653.71
45300 Diagnostic Examination Of Rectum And Lower Large Bowel Using A Rigid Endoscope	\$91.57
45303 Dilation Of Rectum And/Or Lower Large Bowel Using A Rigid Endoscope	\$966.90
45305 Biopsies Of Rectum And/Or Lower Large Bowel Using A Rigid Endoscope	\$176.58
45307 Removal Of Foreign Bodies From Rectum And/Or Lower Large Bowel Using A Rigid Endoscope	\$206.64
45308 Removal Of Polyp Or Growth Of Rectum And Large Bowel Using An Endoscope With An Electrical Cautery	\$198.66
45309 Removal Of Polyp Or Growth Of Rectum And Large Bowel Using An Endoscope With A Mechanical Snare	\$204.65
Removal Of Multiple Tissue Abnormalities, Tumors, Or Polyps Of Lower Large Bowel By Hot Biopsy Forceps, Electric Cautery, Or Snare, Using	
45315 A Rigid Endoscope	\$219.95
45317 Control Of Bleeding Of Lower Large Bowel Using A Rigid Endoscope	\$165.15
45320 Destruction Of Multiple Tissue Abnormalities, Tumors, Or Polyps Of Lower Large Bowel Using A Rigid Endoscope	\$216.03
45321 Release Of Twisted Lower Large Bowel Using A Rigid Endoscope	\$91.32
45327 Insertion Of Stent Into Lower Large Bowel Using A Rigid Endoscope	\$103.12
45330 Diagnostic Examination Of The Lower Portion Of The Large Bowel Using An Endoscope	\$141.00
45331 Biopsy Of The Lower Large Bowel Using An Endoscope (Sigmoidoscopy)	\$210.13
45332 Removal Of Foreign Bodies In Lower Portion Of The Large Bowel (Colon) Using An Endoscope (Colonoscopy)	\$249.59
45333 Removal Of Polyps Or Growths In Upper Large Bowel Using An Endoscope (Sigmoidoscopy) Using Electric Cautery	\$327.88
45334 Control Of Bleeding In Lower Large Bowel Using An Endoscope	\$365.00
45335 Injections Beneath Lining Of Lower Large Bowel, Using A Flexible Endoscope	\$291.76
45337 Decompression Of Twisted Or Abnormally Dilated Lower Large Bowel, Using A Flexible Endoscope	\$104.55
Placement Of Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And	ψ101.00
45338 Interpretation	\$269.44
45340] Balloon Dilation Of Lower Large Bowel, Using A Flexible Endoscope	\$464.14
45341 Ultrasound Examination Of Lower Large Bowel , Using A Flexible Endoscope	\$113.59
45342 Fine Needle Aspirations And/Or Biopsies Of Lower Large Bowel With Ultrasound Guidance, Using A Flexible Endoscope	\$155.16
45346 Destruction Of Tissue Abnormalities, Tumors, Or Polyps Of Lower Large Bowel Using A Flexible Endoscope	\$2,374.38
45347 Insertion Of Stent Into Lower Large Bowel, Using A Flexible Endoscope	\$140.87
45349 Removal Of Lower Portion Of The Large Bowel Tissue Using An Endoscope (Sigmoidoscopy)	\$181.14
45350 Banding Of Hemorrhoids Using A Flexible Endoscope (Sigmoidoscope)	\$505.29
45378 Diagnostic Examination Of The Colon (Large Bowel) Using An Endoscope(Colonoscopy); High Risk	\$365.51
45379 Removal Of Foreign Bodies In Large Bowel (Colon) Using An Endoscope (Colonoscopy)	\$422.21
45380 Biopsy Of The Large Bowel Using An Endoscope (Colonoscopy)	\$473.55
45380 Biopsy of The Large Bower Using All Endoscope (Coloniscopy) 45381 Injections Beneath Lining Of Large Bowel, Using A Flexible Endoscope	\$473.55 \$474.47
45382 Control Of Bleeding In Upper Large Bowel Using An Endoscope 45384 Removal Of Tissue Abnormalities, Tumors, Or Polyps Of Large Bowel By Hot Biopsy Forceps, Using A Flexible Endoscope	\$485.33 \$511.50
	\$511.50 \$490.72
45385 Removal Of Polyps Or Growths In Large Bowel Using An Endoscope (Colonoscopy) Using A Mechanical Snare	\$489.72
45386 Balloon Dilation Of Large Bowel Using A Flexible Endoscope 45388 Destruction Of Tissue Abnormalities, Tumors, Or Polyps Of Large Bowel Using A Flexible Endoscope	\$673.28 \$2.251.70
45388 Destruction Of Tissue Adnormalities, Turnors, Or Polyps of Large Bowel Using A Flexible Endoscope 45389 Insertion Of Stent In Large Bowel Using A Flexible Endoscope	\$2,251.79
45389 Insertion of Stent in Large Bowel Osing A Flexible Endoscope 45390 Removal Of Large Bowel Tissue Using A Flexible Endoscope (Colonoscopy)	\$264.51
45390 Removal Of Large Bower Tissue Osing A Flexible Endoscope (Colonoscopy) 45391 Ultrasound Examination Of Large Bowel Using A Flexible Endoscope	\$337.17
45391 Oitrasound Examination of Large Bowel Using A Flexible Endoscope 45392 Fine Needle Aspirations And/Or Biopsies Of Large Bowel With Ultrasound Guidance, Using A Flexible Endoscope	\$261.88
45392 Fine Needle Aspirations And/Or Biopsies Of Large Bowel With Offrasound Guidance, Using A Flexible Endoscope 45393 Decompression Of Twisted Or Abnormally Dilated Large Bowel, Using A Flexible Endoscope	\$277.38 \$254.66
45393 Decompression Of Twisted Or Adnormally Dilated Large Bowel, Using A Flexible Endoscope 45395 Removal Of Rectum With Creation Of Large Bowel Opening Through Using An Endoscope, Abdominoperineal Approach	\$254.66 \$1.762.56
45395 Removal Of Rectum With Creation Of Large Bowel Opening Through Using An Endoscope, Abdominoperineal Approach 45397 Removal Of Rectum Using An Endoscope, Abdominoperineal Approach	\$1,762.56
45397 Removal Of Rectum Using An Endoscope, Addominoperineal Approach 45398 Banding Of Hemorrhoids Using A Flexible Endoscope (Colonoscope)	\$2,229.53
11111	\$607.90
45399 Large Bowel Procedure	\$879.67
45400 Laparoscopy, Surgical; Proctopexy (For Prolapse)	\$1,190.39
45402 Laparoscopy, Surgical; Proctopexy (For Prolapse), With Sigmoid Resection	\$1,359.30
45499 Unlisted Laparoscopy Procedure, Rectum	Price By Report
45500 Repair Of Narrowed Rectum	\$518.56
45505 Repair Of Bulging Of Lining Of Rectum Through Anus	\$555.42
LARE: WUDDOCTOR LIT VOIDS IN MOSTUM	\$159.19
45520 Injection Of Veins In Rectum	\$954.32
45540 Fixation Of Rectum To Sacrum, Open Abdominal Procedure	. COEC 4.4
45540 Fixation Of Rectum To Sacrum, Open Abdominal Procedure 45541 Fixation Of Rectum To Sacrum By Perineal Approach	\$856.14
45540 Fixation Of Rectum To Sacrum, Open Abdominal Procedure 45541 Fixation Of Rectum To Sacrum By Perineal Approach 45550 Fixation Of Rectum To Sacrum With Removal Of Large Bowel, Open Abdominal Procedure	\$1,317.04
45540 Fixation Of Rectum To Sacrum, Open Abdominal Procedure 45541 Fixation Of Rectum To Sacrum By Perineal Approach 45550 Fixation Of Rectum To Sacrum With Removal Of Large Bowel, Open Abdominal Procedure 45560 Repair Of Bulging Of Rectum Into Vagina	\$1,317.04 \$631.10
45540 Fixation Of Rectum To Sacrum, Open Abdominal Procedure 45541 Fixation Of Rectum To Sacrum By Perineal Approach 45550 Fixation Of Rectum To Sacrum With Removal Of Large Bowel, Open Abdominal Procedure 45560 Repair Of Bulging Of Rectum Into Vagina 45562 Exploration, Repair, And Presacral Drainage For Rectal Injury;	\$1,317.04 \$631.10 \$1,027.28
45540 Fixation Of Rectum To Sacrum, Open Abdominal Procedure 45541 Fixation Of Rectum To Sacrum By Perineal Approach 45550 Fixation Of Rectum To Sacrum With Removal Of Large Bowel, Open Abdominal Procedure 45560 Repair Of Bulging Of Rectum Into Vagina 45562 Exploration, Repair, And Presacral Drainage For Rectal Injury; 45563 Repair Of Rectal Wound, With Surgically Created Opening Into Large Bowel From Body Wall (Colostomy)	\$1,317.04 \$631.10 \$1,027.28 \$1,660.73
45540 Fixation Of Rectum To Sacrum, Open Abdominal Procedure 45541 Fixation Of Rectum To Sacrum By Perineal Approach 45550 Fixation Of Rectum To Sacrum With Removal Of Large Bowel, Open Abdominal Procedure 45560 Repair Of Bulging Of Rectum Into Vagina 45562 Exploration, Repair, And Presacral Drainage For Rectal Injury;	\$1,317.04 \$631.10 \$1,027.28

Code	Description	Fee
	Closure Of Rectourethral Fistula;	\$1,137.96
	Closure Of Rectourethral Fistula; With Colostomy	\$1,375.93
	Manual Replacement Of Bulging Of Rectum Through Anus Under Anesthesia	\$191.76
45905	Dilation Of Sphincter Of Anus Under Anesthesia	\$147.39
45910	Dilation Of Constricted Rectum Under Anesthesia	\$129.82
	Removal Of Impacted Stool Or Foreign Body From Rectum Under Anesthesia	\$247.20
	Anorecta Exam, Surgical, Requiring Anesthesia (General, Spinal, Or Epidural), Diagnostic	\$105.28
	Unlisted Procedure, Rectum	Price By Report
	Insertion Of Drain (Seton) In Anus	\$116.20
	Removal Of Drain (Seton) From Anus Drainage Of Rectal Abscess, Deep	\$250.39
	Incision And Drainage Of Abscess Within Wall Of Rectum Under Anesthesia	\$384.49 \$405.59
	Drainage Of Rectal Abscess, Superficial, Surrounding The Anus	\$168.67
	Incision And Drainage Of Abscess In Wall Of Rectum Or Between Rectum And Muscle With Incision Or Removal Of Abnormal Drainage Tract	\$493.84
	Incision Of Tissue Blocking Rectum Of Infant Incision Of Sphincter Of Anus	\$252.79 \$201.53
	Incision Of External Hemorrhoid With Blood Clot (Thrombosed Hemorrhoid)	\$173.86
	Removal Of Chronic Tear (Fissure) Of Anus	\$425.10
	Removal Of Single External Benign Growth (Papilla Or Tag) Of Anus	\$178.21
	Removal Of External Hemorrhoids By Rubber Banding	\$232.26
46230	Removal Of Multiple External Benign Growths (Papillas Or Tags) Of Anus	\$278.46
46250	Hemorrhoidectomy, External, 2 Or More Columns/Groups	\$335.69
46255	Removal Of Single External And Internal Hemorrhoid Group	\$413.21
	Removal Of Single External And Internal Hemorrhoid Group And Chronic Tear (Fissure) In Anus	\$388.64
46258	Removal Of Single External And Internal Hemorrhoid Group With Removal Of Abnormal Drainage Tract In Anus	\$437.64
	Removal Of Multiple Internal And External Hemorrhoid Groups	\$493.37
	Removal Of Multiple Internal And External Hemorrhoid Groups And Chronic Tear (Fissure) In Anus	\$486.58
	Removal Of Multiple Internal And External Hemorrhoid Groups With Removal Of Abnormal Drainage Tract From Anus	\$534.38
	Repair Of Abnormal Anal Drainage Tract, Under The Skin	\$373.23
	Repair Of Anal Muscle And Abnormal Anal Drainage Tract, With The Sphincter	\$473.47
	Repair Of Anal Muscle And Abnormal Anal Drainage Tract, Across Tissue Around The Sphincter	\$505.49
	Repair Of Abnormal Anal Drainage Tract, Second Stage	\$534.57
	Repair Of Abnormal Anal Drainage Tract With Rectal Tissue Flap	\$515.76
	Removal Of External Hemorrhoid With Blood Clot (Thrombosed Hemorrhoid) Injection Of Sclerosing Solution, Hemorrhoids Or Mucosal Prolapse	\$190.87
	Injection Of Scienosing Solution, Hemormolas of Mucosal Prolapse Injection Of Agent To Destroy Nerves To Internal Sphincter Of Anus	\$284.39
	Diagnostic Examination Of The Anus Using An Endoscope	\$276.78 \$88.99
	Diagnostic Examination of The Vitas Gang Art Endescope Diagnostic Examination Of Anus With Magnification And Chemical Agent Enhancement Using An Endoscope	\$146.73
	Anoscopy; With Dilation (Eg, Balloon, Guide Wire, Bougie)	\$680.74
	Anoscopy; With Biopsy, Single Or Multiple	\$279.38
	Biopsies Of Anus With Magnification And Chemical Agent Enhancement Using An Endoscope	\$223.74
	Anoscopy; With Removal Of Foreign Body	\$290.22
46610	Anoscopy; With Removal Of Single Tumor, Polyp, Or Other Lesion By Hot Biopsy Forceps Or Bipolar Cautery	\$274.93
46611	Anoscopy; With Removal Of Single Tumor, Polyp, Or Other Lesion By Snare Technique	\$222.69
46612	Anoscopy; With Removal Of Multiple Tumors, Polyps, Or Other Lesions By Hot Biopsy Forceps, Bipolar Cautery Or Snare Technique	\$333.42
46614	Anoscopy; With Control Of Bleeding (Eg, Injection, Bipolar Cautery, Unipolar Cautery, Laser, Heater Probe, Stapler, Plasma Coagulator)	\$164.78
	Anoscopy; With Ablation Of Tumor(S), Polyp(S), Or Other Lesion(S) Not Amenable To Removal By Hot Biopsy Forceps, Bipolar Cautery Or	
	Snare Technique	\$175.92
	Plastic Repair Of Anal Stricture, Adult	\$605.26
	Plastic Repair Of Anal Stricture, Infant	\$522.45
	Repair Of Abnormal Anal Drainage Tract With Tissue Glue	\$161.93
46707	Repair Of Abnormal Anal Drainage Tract With Implanted Plug	\$461.83
46710	Repair Of Abnormal Drainage Tract Or Pocket From Surgically Created Of Small Intestinal Reservoir For Feces, Via Incision Of Region Between Thighs (Combined Abdominoperineal Approach)	\$996.43
	Repair Of Abnormal Drainage Tract Or Pocket From Surgically Created Of Small Intestinal Reservoir For Feces, Via Incision Of Abdomen And	
	Region Between Thighs (Combined Abdominoperineal Approach)	\$1,973.16
	Repair Of Low Imperforate Anus; With Anoperineal Fistula ("Cut-Back" Procedure)	\$506.02
46716	Repair Of Low Imperforate Anus; With Transposition Of Anoperineal Or Anovestibular Fistula	\$1,042.98
46730	Repair Of Absence Of Opening In Anus, Via Incision Of Region Between Thighs Or Below Sacrum (Perineal Or Sacroperineal Approach)	\$1,663.78
	Repair Of Absence Of Opening In Anus, Via Incision Of Abdomen And Region Between Thighs And Below Sacrum (Combined Abdominal And	V 1,000110
46735	Sacroperineal Approach)	\$2,039.29
46740	Repair Of Absence Of Opening In Anus And Abnormal Opening From Rectum Into Urethra Or Vagina, Approached Through Region Between Thighs Or Below Sacrum (Perineal Or Sacroperineal Approach)	\$2,021.55
40740	Repair Of Absence Of Opening In Anus And Abnormal Opening From Rectum Into Urethra Or Vagina, Approached Through Abdomen Or	Ψ2,021.00
46742	Below Sacrum (Combined Abdominal And Sacroperineal Approach) Repair Of Defect For Single Channel Outlet Of Rectum, Vagina, And Urinary Tract, Via Incision Of Region Between Thighs Or Below Sacrum	\$2,230.28
46744	(Perineal Or Sacroperineal Approach)	\$3,131.19
40710	Repair Of Defect For Single Channel Outlet Of Rectum, Vagina, And Urinary Tract, Via Incision Of Region Between Thighs Or Below Sacrum	#0.503
46746	(Combined Abdominal And Sacroperineal Approach) Repair Of Defect For Single Channel Outlet Of Rectum, Vagina, And Urinary Tract, Via Incision Of Region Between Thighs Or Below Sacrum	\$2,527.38
46740	(Combined Abdominal And Sacroperineal Approach) With Lengthening Of Vagina	\$3,731.61
	Repair Of Anal Muscle For Incontinence Or Prolapse, Adult	\$687.19
	Repair Of Anal Muscle For Incontinence Or Prolapse, Addit	\$608.55
	Graft (Thiersch Operation) For Rectal Incontinence And/Or Prolapse	\$561.96
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	Description Removal Of Thiersch Wire Or Suture	Fee \$330.91
	Repair Of Anal Muscle To Correct Incontinence, Adult With Muscle Transplant	\$1,014.92
	Repair Of Anal Muscle To Correct Incontinence, Adult With Muscle Tightening	\$834.82
	Chemical Destruction Of Tissue Abnormalities Of Anus	\$214.25
46910	Destruction Of Tissue Abnormalities Of Anus	\$186.99
46916	Electrical Destruction Of Tissue Abnormalities Of Anus	\$251.46
46917	Laser Destruction Of Tissue Abnormalities Of Anus	\$426.14
46922	Removal Of Tissue Abnormalities Of Anus	\$223.70
	Extensive Destruction Of Tissue Abnormalities Of Anus	\$536.84
	Heat Destruction Of Internal Hemorrhoids	\$207.15
	Repair Of Anal Tear With Dilation Of Anal Muscle, Initial	\$254.57
	Repair Of Anal Tear With Dilation Of Anal Muscle, Subsequent	\$243.21
	Tying Of Single Internal Hemorrhoid Group	\$319.45
	Tying Of Multiple Internal Hemorrhoid Groups	\$263.16
	Stapling Of Internal Hemorrhoid	\$353.72
	Tying Of Arteries To Internal Hemorrhoid	\$448.61
	Unlisted Procedure, Anus	Price By Report
47000	Needle Biopsy Of Liver, Accessed Through The Skin	\$303.10
47004	Biopsy Of Liver, Needle; When Done For Indicated Purpose At Time Of Other Major Procedure (List Separately In Addition To Code For	# 400 F0
	Primary Procedure)	\$100.52
	Drainage Of Liver Abscess Or Cyst, Open Procedure	\$1,083.73
	Laparotomy, With Aspiration And/Or Injection Of Hepatic Parasitic (Eg, Amoebic Or Echinococcal) Cyst(S) Or Abscess(Es)	\$1,041.27
	Biopsy Of Liver, Wedge Hepatectomy, Resection Of Liver; Partial Lobectomy	\$559.42 \$1,517.10
	Hepatectomy, Resection Of Liver; Partial Lobectomy Hepatectomy, Resection Of Liver Trisegmentectomy	\$1,517.18 \$3,027.82
	Hepatectomy, Resection Of Liver, Total Left Lobectomy	\$3,027.82
	Hepatectomy, Resection Of Liver; Total Right Lobectomy	\$2,711.00
	Donor Hepatectomy (Including Cold Preservation), From Cadaver Donor	Price By Report
	Transplantation Of Donor Liver To Anatomic Position	\$5,036.71
	Donor Hepatectomy (Including Cold Preservation), From Living Donor; Left Lateral Segment Only (Segments li And lii)	\$3,152.50
47 140	2010/ Figure Configuration (Figure 2010), For Every 2010/, Eart Edical Cognition City (Cognition Francis)	ψ0,102.00
47141	Donor Hepatectomy, With Preparation And Maintenance Of Allograft, From Living Donor; Total Left Lobectomy (Segments li, lii And Iv)	\$3,765.96
47142	Donor Hepatectomy, With Preparation And Maintenance Of Allograft, From Living Donor; Total Right Lobectomy (Segments V, Vi, Vii And Viii)	\$4,139.12
		· ,
	Backbench Standard Preparation Of Cadaver Donor Whole Liver Graft Prior To Allotransplantation, Including Cholecystectomy, If Necessary,	
47143	And Dissection And Removal Of Surrounding Soft Tissues To Prepare The Vena Cava, Portal Vein, Hepatic Artery, And Common B	\$1,503.25
47144	Preparation Of Donor Liver For Transplantation, With Trisegment Split Of Liver Graft Into 2 Partial Grafts	
		\$1,290.33
	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts	\$1,290.33 \$2,500.86
47145	,	
47145 47146 47147	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection	\$2,500.86 \$286.05 \$332.91
47145 47146 47147 47300	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver	\$2,500.86 \$286.05 \$332.91 \$1,012.18
47145 47146 47147 47300 47350	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24
47145 47146 47147 47300 47350 47360	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32
47145 47146 47147 47300 47350 47360 47361	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17
47145 47146 47147 47300 47350 47360 47361 47362	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68
47145 47146 47147 47300 47350 47360 47361 47362 47370	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68
47145 47146 47147 47300 47350 47360 47361 47362 47370 47371	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24
47145 47146 47147 47300 47350 47360 47361 47362 47370 47371 47379	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report
47145 47146 47147 47300 47350 47360 47361 47362 47370 47371 47379 47380	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suture Of Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report
47145 47146 47147 47300 47350 47360 47361 47362 47370 47371 47379 47380	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suture Of Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66
47145 47146 47147 47300 47350 47360 47361 47362 47370 47371 47379 47380 47381	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82
47145 47146 47147 47300 47350 47360 47361 47362 47370 47371 47379 47380 47381 47382 47383	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency Destruction Of 1 Or More Liver Growths, Accessed Through The Skin, Using Freezing	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82
47145 47146 47147 47300 47350 47360 47361 47362 47370 47371 47379 47381 47382 47383 47383	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency Unlisted Procedure, Liver	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report
47145 47146 47147 47300 47350 47360 47361 47362 47370 47371 47379 47380 47381 47382 47383 47389 47400	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report
47145 47146 47147 47300 47350 47360 47361 47362 47370 47371 47379 47380 47381 47382 47383 47389 47400	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Readiofrequency Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report
47145 47146 47147 47300 47350 47360 47361 47362 47370 47371 47379 47380 47381 47382 47383 47389 47400	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,904.47
47145 47146 47147 47300 47350 47360 47361 47362 47370 47371 47379 47380 47381 47382 47383 47389 47400	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency Destruction Of 1 Or More Liver Growths, Accessed Through The Skin, Using Freezing Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,904.47
47145 47146 47147 47300 47350 47361 47362 47370 47371 47379 47381 47382 47383 47400 47425	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency Destruction Of 1 Or More Liver Growths, Accessed Through The Skin, Using Freezing Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,186.27
47145 47146 47147 47300 47350 47361 47362 47370 47371 47379 47380 47381 47382 47383 47400 47425 47460	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency Destruction Of 1 Or More Liver Growths, Accessed Through The Skin, Using Freezing Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,186.27
47145 47146 47147 47300 47350 47360 47361 47361 47371 47379 47380 47381 47382 47480 47420 47425	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suturing Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hound To Control Bleeding, Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency Destruction Of 1 Or More Liver Growths, Accessed Through The Skin, Using Freezing Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed,	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,186.27
47145 47146 47147 47300 47350 47361 47362 47371 47379 47381 47381 47382 47480 47425 47460 47480	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suture Of Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Freezing Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,186.27
47145 47146 47147 47300 47350 47360 47361 47370 47371 47379 47381 47382 47383 47400 47420 47440 47440 47490	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Atterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suture Of Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Freezing Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bille Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,186.27 \$1,186.27 \$1,217.86 \$1,132.53 \$788.56
47145 47146 47147 47300 47350 47361 47362 47370 47371 47379 47383 47383 47389 47400 47420 47440 47440 47490	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suture Of Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency Destruction Of 1 Or More Growths, Accessed Through The Skin, Using Freezing Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, Existing Access	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,186.27 \$1,217.86 \$1,132.53 \$788.56
47145 47146 47147 47300 47350 47361 47362 47370 47371 47379 47380 47381 47382 47400 47420 47425 47460 47490 47531	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing Destruction Of 1 Or More Growths On Liver, Accessed Through The Skin, Using Radiofrequency Destruction Of 1 Or More Growths, Accessed Through The Skin, Using Freezing Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Galibladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Galibladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,186.27 \$1,217.86 \$1,132.53 \$788.56
47145 47146 47147 47300 47350 47361 47362 47370 47371 47379 47380 47381 47382 47400 47420 47425 47460 47490 47531	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suture Of Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency Destruction Of 1 Or More Growths, Accessed Through The Skin, Using Freezing Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Sallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation. Existing Access Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, New Access	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,186.27 \$1,217.86 \$1,132.53 \$788.56
47145 47146 47147 47300 47350 47361 47361 47370 47371 47379 47380 47381 47382 47383 47389 47400 47420 47425 47460 47490 47531	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Aerous Connection Preparation Of Donor Liver For Transplantation, Aerial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Complex Suture Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S): Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S): Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Freezing Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, New Access Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin With Imaging Including Radiologi	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,186.27 \$1,217.86 \$1,132.53 \$788.56 \$279.67
47145 47146 47147 47300 47350 47361 47362 47370 47371 47379 47381 47382 47400 47420 47425 47460 47490 47531	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suturing Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Mound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Mound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Accessed Through The Skin, Using Reacing Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Reezing Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Callbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation, Existing Access Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using I	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,186.27 \$1,217.86 \$1,132.53 \$788.56 \$279.67 \$410.69
47145 47146 47147 47300 47350 47361 47362 47370 47371 47379 47381 47382 47400 47420 47425 47460 47490 47531	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Control Deciding, Simple Suture Suture Of Liver Wound To Control Bleeding, Simple Suture Suture Of Liver Wound To Control Bleeding, Simple Suture Suturie Of Liver Wound To Control Bleeding, Complex Suture Suturie Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing Destruction Of 1 Or More Growths On Liver, Accessed Through The Skin, Using Freezing Unlisted Procedure, Liver Incision Or Creation Of Opening In Sulbadder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation, External Placement Of Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation, External	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,186.27 \$1,217.86 \$1,312.63 \$788.56 \$279.67
47145 47146 47147 47300 47350 47361 47362 47370 47371 47379 47380 47381 47382 47480 47425 47460 47425 47490 47531 47532	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arterial Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Complex Suture Suturing Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Mound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Mound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Accessed Through The Skin, Using Reacing Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Reezing Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Callbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation, Existing Access Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using I	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,186.27 \$1,217.86 \$1,132.53 \$788.56 \$279.67 \$410.69 \$901.87
47145 47146 47147 47300 47350 47361 47362 47370 47371 47379 47381 47382 47480 47400 47425 47460 47490 47531 47532 47534	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arbiral Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency Destruction Of 1 Or More Growths, Accessed Through The Skin, Using Radiofrequency Destruction Of 1 Or More Liver Growths, Accessed Through The Skin, Using Freezing Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Europe Incision Or Creation Of Opening In Sallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystomy; With Transduodenal Sphincterotomy Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Superv	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,186.27 \$1,217.86 \$1,132.53 \$788.56 \$279.67 \$410.69 \$901.87 \$1,171.20 \$1,414.43
47145 47146 47147 47300 47350 47361 47362 47370 47371 47379 47381 47382 47480 47400 47425 47460 47490 47531 47532 47534	Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arenal Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage: Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency Destruction Of 1 Or More Crowths, Accessed Through The Skin, Using Freezing Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation, Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, New Access Placement Of Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging I	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,186.27 \$1,217.86 \$1,132.53 \$788.56 \$279.67 \$410.69 \$901.87
47145 47146 47147 47300 47350 47361 47362 47370 47371 47379 47381 47382 47383 47400 47420 47420 47453 47532 47533 47534	Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts Preparation Of Donor Liver For Transplantation, Venous Connection Preparation Of Donor Liver For Transplantation, Arbiral Connection Marsupialization Of Cyst Or Abscess Of Liver Suture Of Liver Wound To Control Bleeding, Simple Suture Suturing Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical Unlisted Laparoscopic Procedure, Liver Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency Destruction Of 1 Or More Growths, Accessed Through The Skin, Using Radiofrequency Destruction Of 1 Or More Liver Growths, Accessed Through The Skin, Using Freezing Unlisted Procedure, Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Europe Incision Or Creation Of Opening In Sallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystomy; With Transduodenal Sphincterotomy Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Superv	\$2,500.86 \$286.05 \$332.91 \$1,012.18 \$895.24 \$1,663.32 \$3,126.17 \$1,462.68 \$1,111.24 \$1,118.07 Price By Report \$1,490.54 \$1,312.66 \$4,118.82 \$6,048.77 Price By Report \$1,904.47 \$1,186.27 \$1,217.86 \$1,132.53 \$788.56 \$279.67 \$410.69 \$901.87 \$1,171.20 \$1,414.43

Code	Description	Fee
Code	Placement Of Stent Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation, Existing	166
47538	Access Site	\$3,868.28
47500	Placement Of Stent Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation, New	£4.070.44
4/539	Access Site Placement Of Stent And Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And	\$4,279.44
47540	Interpretation	\$4,335.15
		ψ 1,000.10
47541	Placement Of Access Device Into Biliary Tract, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation	\$1,155.24
47542	Balloon Dilation Of Bile Duct Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation	\$497.31
47543	Biopsy Of Bile Duct Or Liver Duct Accessed Through The Skin Using Imaging Guidance With Radiological Supervision And Interpretation	\$387.42
17010	Removal Of Biliary Duct Or Gallbladder Stone, Accessed Through The Skin Using Imaging Guidance And Radiological Supervision And	ψοστ.12
47544	Interpretation	\$845.94
	Biliary Endoscopy, Intraoperative (Choledochoscopy) (List Separately In Addition To Code For Primary Procedure)	\$160.00
	Diagnostic Examination Of Bile Ducts Using An Endoscope, Accessed Through The Skin	\$247.83
	Biopsy Of Bile Ducts Using An Endoscope, Accessed Through The Skin	\$248.72
	Removal Of Bile Duct Stones Using An Endoscope, Accessed Through The Skin Dilation Of Bile Ducts Using An Endoscope, Accessed Through The Skin	\$450.68
	Dilation Of Bile Ducts With Stent Insertion Using An Endoscope, Accessed Through The Skin	\$295.87 \$335.16
	Laparoscopy, Surgical; Cholecystectomy	\$656.08
	Laparoscopy, Surgical; Cholecystectomy With Cholangiography	\$713.61
	Laparoscopy, Surgical; Cholecystectomy With Exploration Of Common Duct	\$1,009.61
47570	Laparoscopy, Surgical; Cholecystoenterostomy	\$691.78
	Unlisted Laparoscopy Procedure, Biliary Tract	Price By Report
	Cholecystectomy;	\$1,059.15
	Cholecystectomy; With Cholangiography Cholecystectomy; With Evployation Of Common Dust:	\$1,150.57
	Cholecystectomy With Exploration Of Common Duct; Cholecystectomy With Exploration Of Common Duct; With Choledochoenterostomy	\$1,009.61 \$1,257.24
	Removal Of Gallbladder And Incision Or Repair Of Gallbladder Sphincter	\$1,237.24
	Exploration For Congenital Atresia Of Bile Ducts, Without Repair, With Or Without Liver Biopsy, With Or Without Cholangiography	\$950.36
	Portoenterostomy (Eg, Kasai Procedure)	\$1,544.41
47711	Removal Of Growth From Bile Duct External To Liver	\$1,594.26
	Removal Of Growth From Bile Duct Within Liver	\$1,768.24
	Excision Of Choledochal Cyst	\$1,108.99
	Cholecystoenterostomy; Direct	\$1,033.50
	Cholecystoenterostomy; With Gastroenterostomy Cholecystoenterostomy; Roux-En-Y	\$1,207.91 \$1,171.64
	Cholecystoenterostomy; Roux-En-Y With Gastroenterostomy	\$1,171.04
	Connection of Bile Duct External To Liver To Small Intestine	\$1,866.72
	Connection Of Bile Duct Within Liver To Small Intestine	\$2,675.42
47780	End-To-Side Connection Of Bile Duct External To Liver To Small Intestine	\$1,600.96
	End-To-Side Connection Of Bile Duct Within Liver To Small Intestine	\$2,848.02
	Reconstruction, Plastic, Of Extrahepatic Biliary Ducts With End-To-End Anastomosis	\$1,379.62
	Placement Of Choledochal Stent	\$998.55
	U-Tube Hepaticoenterostomy Suture Of Extrahepatic Biliary Duct For Pre-Existing Injury (Separate Procedure)	\$1,358.56 \$1,214.99
	Unlisted Procedure, Biliary Tract	Price By Report
	Insertion Of External Drains From Gallbladder, Bile Duct And Small Bowel For Acute Pancreatitis	\$1,665.68
48001	Insertion Of External Drains Around Pancreas For Acute Pancreatitis	\$2,035.55
	Removal Of Pancreatic Calculus	\$1,051.60
	Biopsy Of Pancreas, Open Procedure	\$786.36
	Needle Biopsy Of Pancreas, Accessed Through The Skin	\$464.11
	Debride/Resect Pancreas Excision Of Lesion Of Pancreas (Eg, Cyst, Adenoma)	\$2,523.13
	Pancreatectomy, Distal Subtotal, With Or Without Splenectomy; Without Pancreaticojejunostomy	\$981.55 \$1,359.94
	Pancreatectomy, Distal Subtotal, With Or Without Splenectomy; With Pancreaticojejunostomy	\$1,447.90
.0.10	y,,,,,	ψ.,117.00
	Partial Removal Of Pancreas With Connection Of Pancreas To Small Bowel, With Preservation Of First Part Of Small Intestine (Duodenum)	\$1,679.70
	Excision Of Ampulla Of Vater	\$1,113.77
	Partial Removal Of Pancreas, Bile Duct And Small Bowel With Connection Of Pancreas To Small Bowel	\$2,924.79
	Partial Removal Of Pancreas, Bile Duct And Small Bowel Without Connection Of Pancreas To Small Bowel	\$2,558.17
	Near Total Removal Of Pancreas, Bile Duct And Small Bowel With Connection Of Pancreas To Small Bowel Partial Removal Of Pancreas, Bile Duct, And Small Bowel	\$2,924.79 \$2,569.32
	Pancreatectomy, Total;	\$2,569.32
	Pancreatectomy, Total Or Subtotal, With Autologous Transplantation Of Pancreas Or Pancreatic Islet Cells	Price By Report
	Injection Procedure For Intraoperative Pancreatography (List Separately In Addition To Code For Primary Procedure)	\$93.32
	Marsupialization Of Pancreatic Cyst	\$1,029.04
		\$982.47
48510	Insertion Of Drain From Pancreatic Cyst Into Abdominal Cavity, Open Procedure	
48510 48520	Creation Of Drainage Tract From Pancreatic Cyst To Small Bowel, Direct	\$979.00
48510 48520 48540	Creation Of Drainage Tract From Pancreatic Cyst To Small Bowel, Direct Internal Anastomosis Of Pancreatic Cyst To Gastrointestinal Tract; Roux-En-Y	\$979.00 \$1,160.04
48510 48520 48540 48545	Creation Of Drainage Tract From Pancreatic Cyst To Small Bowel, Direct Internal Anastomosis Of Pancreatic Cyst To Gastrointestinal Tract; Roux-En-Y Pancreatorrhaphy For Injury	\$979.00 \$1,160.04 \$1,196.50
48510 48520 48540 48545 48547	Creation Of Drainage Tract From Pancreatic Cyst To Small Bowel, Direct Internal Anastomosis Of Pancreatic Cyst To Gastrointestinal Tract; Roux-En-Y Pancreatorrhaphy For Injury Duodenal Exclusion With Gastrojejunostomy For Pancreatic Injury	\$979.00 \$1,160.04 \$1,196.50 \$1,585.82
48510 48520 48540 48545 48547 48548	Creation Of Drainage Tract From Pancreatic Cyst To Small Bowel, Direct Internal Anastomosis Of Pancreatic Cyst To Gastrointestinal Tract; Roux-En-Y Pancreatorrhaphy For Injury	\$979.00 \$1,160.04 \$1,196.50
48510 48520 48540 48545 48547 48548 48550	Creation Of Drainage Tract From Pancreatic Cyst To Small Bowel, Direct Internal Anastomosis Of Pancreatic Cyst To Gastrointestinal Tract; Roux-En-Y Pancreatorrhaphy For Injury Duodenal Exclusion With Gastrojejunostomy For Pancreatic Injury Pancreaticojejunostomy Side To Side	\$979.00 \$1,160.04 \$1,196.50 \$1,585.82 \$1,481.56

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	Description Communication Comm	Fee
	Preparation Of Donor Pancreas For Transplantation, Each Transplantation Of Pancreatic Allograft	\$205.32
	Removal Of Transplanted Pancreatic Allograft	\$2,334.93
	Unlisted Procedure, Pancreas	\$1,149.53
	Exploratory Laparotomy, Exploratory Celiotomy (Separate Procedure)	Price By Report \$763.31
	Reopening Of Recent Laparotomy	
	Exploration, Retroperitoneal Area (Separate Procedure)	\$732.02
	Exploration, Retroperitorieal Area (Separate Procedure) Exploration And Packing Of Wound In Pelvic Region	\$774.72
	i i	\$398.72
	Re-Exploration Of Wound In Pelvic Region With Removal Of Wound Packing And Repacking, If Necessary	\$362.80
	Drainage Of Abdominal Abscess Or Infection, Open Procedure	\$1,041.17
	Drainage Of Abscess Of Muscle Separating Chest And Abdomen (Diaphragm), Open Procedure	\$898.04
	Drainage Of Abscess Behind Abdominal Cavity, Open Procedure	\$718.52
	Drainage Of Accumulated Abdominal Lymph Fluid, Open Procedure	\$685.51
	Abdominal Paracentesis (Diagnostic Or Therapeutic); Without Imaging Guidance	\$223.84
	Abdominal Paracentesis (Diagnostic Or Therapeutic); With Imaging Guidance	\$321.43
49084	Peritoneal Lavage, Including Imaging Guidance, When Performed	\$94.36
49180	Needle Biopsy Of Abdominal Cavity Growth, Accessed Through The Skin	\$143.28
	Injection Of Abnormal Fluid Accumulation Using Imaging Guidance With Radiological Supervision And Interpretation	\$1,289.47
	Removal Or Destruction Of (5 Centimeters Or Less) Abdominal Cavity Growths, Cysts, Or Abnormal Tissue, Open Procedure	\$1,240.03
49203	Internoval of Destruction of (3 Centimeters of Less) Abdomina Cavity Growns, Cysts, of Abriofina Hissae, Open Frocedure	\$1,240.03
40004	Description Of Joseph et ion Of J. T. a. 4.0.0. Continue to an Abdominal Continue Co	£4.050.70
	Removal Or Destruction Of (5.1 To 10.0 Centimeters) Abdominal Cavity Growths, Cysts, Or Abnormal Tissue, Open Abdominal Procedure	\$1,356.72
	Removal Or Destruction Of (Greater Than 10.0 Centimeters) Abdominal Cavity Growths, Cysts, Or Abnormal Tissue, Open Procedure	\$1,553.24
	Excision Of Presacral Or Sacrococcygeal Tumor	\$1,793.82
	Umbilectomy, Omphalectomy, Excision Of Umbilicus (Separate Procedure)	\$534.43
49255	Omentectomy, Epiploectomy, Resection Of Omentum (Separate Procedure)	\$670.53
1	Laparoscopy, Abdomen, Peritoneum, And Omentum, Diagnostic, With Or Without Collection Of Specimen(S) By Brushing Or Washing	
	(Separate Procedure)	\$327.74
49321	Laparoscopy, Surgical; With Biopsy (Single Or Multiple)	\$344.34
49322	Laparoscopy, Surgical, Abdomen, Peritoneum, And Omentum; With Aspiration Of Cavity Or Cyst (Eg, Ovarian Cyst) (Single Or Multiple)	\$373.74
49323	Laparoscopy, Surgical, Abdomen, Peritoneum, And Omentum; With Drainage Of Lymphocele To Peritoneal Cavity	\$569.38
49324	Laparoscopy, Surgical; With Insertion Of Tunneled Intraperitoneal Catheter	\$394.57
	Lapaorscopy Surgical; With Revision Of Previously Placed Intraperitoneal Connula Or Catheter, With Removal Of Intraluminal Material	•
49325	Performed	\$368.12
	Laparoscopy, Surgical; With (Omental Tacking Procedure)(List Separately In Addition To Code For Primary Procedure)	\$182.73
73320		ψ102.73
	Laparoscopy, Surgical, With Placement Of Interstitial Device(S) For Radiation Therapy Guidance (Eg, Fiducial Markers, Dosimeter), Intra-	
	Abdominal, Intrapelvic, And/Or Retroperitoneum, Including Imaging Guidance, If Performed, Single Or Multiple (List Sep	\$113.75
	Unlisted Laparoscopy Procedure, Abdomen, Peritoneum And Omentum	Price By Report
	Injection Of Air Or Contrast Into Peritoneal Cavity (Separate Procedure)	\$144.20
49402	Removal Of Perit. Body From Cavity	\$760.63
49405	Fluid Collection Drainage By Catheter Using Imaging Guidance, Accessed Through The Skin	\$987.68
49406	Fluid Collection Drainage Of The Abdominal Region By Catheter Using Imaging Guidance, Accessed Through The Skin	\$758.84
49407	Fluid Collection Drainage By Catheter Using Imaging Guidance, Accessed Through Vagina Or Rectum	\$638.35
49411	Insertion Of Devices In Abdominal Cavity For Radiation Therapy Guidance, Accessed Through The Skin	\$470.19
49412	Insertion Of Devices For Radiation Therapy Guidance In Abdominal Cavity, Open Procedure	\$71.79
	Insertion Of Tunneled Intraperitoneal Catheter (Eg, Dialysis, Intraperitoneal Chemotherapy Instillation, Management Of Ascites), Complete	·
49418	Procedure, Including Imaging Guidance, Catheter Placement, Contrast Injection When Performed, And Radiological	\$1,099.50
	Insertion Of Tunneled Intraperitoneal Catheter, With Subcutaneous Port (le, Totally Implantable)	\$382.92
	Insertion Of Abdominal Cavity Catheter For Drainage Or Dialysis, Open Procedure	\$198.62
_	Removal Of Tunneled Intraperitoneal Catheter	\$216.43
	Exchange Of Previously Placed Abscess Or Cyst Drainage Catheter Under Radiological Guidance (Separate Procedure)	\$577.14
	Contrast Injection For Assessment Of Abscess Or Cyst Via Previously Placed Drainage Catheter Or Tube (Separate Procedure)	\$190.41
	Insertion Of Peritoneal-Venous Shunt	\$654.00
	Revision Of Peritoneal-Venous Shunt	\$600.51
	Injection Procedure (Eg, Contrast Media) For Evaluation Of Previously Placed Peritoneal-Venous Shunt	\$35.03
	Ligation Of Peritoneal-Venous Shunt	\$384.15
	Removal Of Peritoneal-Venous Shunt	\$407.33
49435	Insertion Of Abdominal Cavity Catheter Extension, Beneath The Skin	\$103.49
		A
	Creation Of Exit Site For Catheter In Abdominal Cavity	\$487.38
		\$487.38 \$926.42
49440	Creation Of Exit Site For Catheter In Abdominal Cavity	
49440 49441	Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast	\$926.42
49440 49441	Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast	\$926.42 \$1,044.59
49440 49441 49442	Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast	\$926.42 \$1,044.59
49440 49441 49442 49446	Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast	\$926.42 \$1,044.59 \$885.80
49440 49441 49442 49446 49450	Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast	\$926.42 \$1,044.59 \$885.80 \$891.95 \$670.83
49440 49441 49442 49446 49450 49451	Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast	\$926.42 \$1,044.59 \$885.80 \$891.95 \$670.83 \$731.47
49440 49441 49442 49446 49450 49451 49452	Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast	\$926.42 \$1,044.59 \$885.80 \$891.95 \$670.83 \$731.47 \$917.95
49440 49441 49442 49446 49450 49451 49452 49460	Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast	\$926.42 \$1,044.59 \$885.80 \$891.95 \$670.83 \$731.47 \$917.95
49440 49441 49442 49446 49450 49451 49452 49460	Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast	\$926.42 \$1,044.59 \$885.80 \$891.95 \$670.83 \$731.47 \$917.95
49440 49441 49442 49446 49450 49451 49452 49460 49465	Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Mechanical Removal Of Obstructive Material From Stomach, Large, Or Small Bowel Tube Using Fluoroscopic Guidance Contrast Injections For X-Ray Imaging Through Existing Tube In Stomach, Small Bowel Or Large Bowel, Accessed Through Skin Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-	\$926.42 \$1,044.59 \$885.80 \$891.95 \$670.83 \$731.47 \$917.95 \$677.87 \$147.80
49440 49441 49442 49446 49450 49451 49452 49460 49465	Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Mechanical Removal Of Obstructive Material From Stomach, Large, Or Small Bowel Tube Using Fluoroscopic Guidance Contrast Injections For X-Ray Imaging Through Existing Tube In Stomach, Small Bowel Or Large Bowel, Accessed Through Skin Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-Conceptual Age, With Or Without Hydrocelectomy; Reducible	\$926.42 \$1,044.59 \$885.80 \$891.95 \$670.83 \$731.47 \$917.95
49440 49441 49442 49446 49450 49451 49452 49460 49465	Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Mechanical Removal Of Obstructive Material From Stomach, Large, Or Small Bowel Tube Using Fluoroscopic Guidance Contrast Injections For X-Ray Imaging Through Existing Tube In Stomach, Small Bowel Or Large Bowel, Accessed Through Skin Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post- Conceptual Age, With Or Without Hydrocelectomy; Reducible Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-	\$926.42 \$1,044.59 \$885.80 \$891.95 \$670.83 \$731.47 \$917.95 \$677.87 \$147.80
49440 49441 49442 49446 49450 49451 49452 49460 49465	Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Mechanical Removal Of Obstructive Material From Stomach, Large, Or Small Bowel Tube Using Fluoroscopic Guidance Contrast Injections For X-Ray Imaging Through Existing Tube In Stomach, Small Bowel Or Large Bowel, Accessed Through Skin Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-Conceptual Age, With Or Without Hydrocelectomy; Reducible Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-Conceptual Age, With Or Without Hydrocelectomy; Incarcerated Or Strangulated	\$926.42 \$1,044.59 \$885.80 \$891.95 \$670.83 \$731.47 \$917.95 \$677.87 \$147.80
49440 49441 49442 49446 49450 49451 49452 49460 49465 49491	Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Mechanical Removal Of Obstructive Material From Stomach, Large, Or Small Bowel Tube Using Fluoroscopic Guidance Contrast Injections For X-Ray Imaging Through Existing Tube In Stomach, Small Bowel Or Large Bowel, Accessed Through Skin Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-Conceptual Age, With Or Without Hydrocelectomy; Reducible Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-Conceptual Age, With Or Without Hydrocelectomy; Incarcerated Or Strangulated Repair, Initial Inguinal Hernia, Full Term Infant Under Age 6 Months, Or Preterm Infant Over 50 Weeks Postconceptual Age And Under Age 6	\$926.42 \$1,044.59 \$885.80 \$891.95 \$670.83 \$731.47 \$917.95 \$677.87 \$147.80 \$757.88
49440 49441 49442 49446 49450 49451 49460 49465 49491 49492	Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Mechanical Removal Of Obstructive Material From Stomach, Large, Or Small Bowel Tube Using Fluoroscopic Guidance Contrast Injections For X-Ray Imaging Through Existing Tube In Stomach, Small Bowel Or Large Bowel, Accessed Through Skin Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-Conceptual Age, With Or Without Hydrocelectomy; Reducible Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-Conceptual Age, With Or Without Hydrocelectomy; Incarcerated Or Strangulated	\$926.42 \$1,044.59 \$885.80 \$891.95 \$670.83 \$731.47 \$917.95 \$677.87 \$147.80

Code	Description	Fee
	Repair Initial Inguinal Hernia, Age 6 Months To Under 5 Years, With Or Without Hydrocelectomy; Reducible	\$417.51
	Repair Initial Inguinal Hernia, Age 6 Months To Under 5 Years, With Or Without Hydrocelectomy; Incarcerated Or Strangulated	\$538.85
49505	Repair Initial Inguinal Hernia, Age 5 Years Or Over; Reducible	\$522.05
49507	Repair Initial Inguinal Hernia, Age 5 Years Or Over; Incarcerated Or Strangulated	\$540.78
	Repair Of Groin (Inguinal) Hernia That Is Not Trapped	\$551.50
	Repair Of Trapped Or Strangulated Groin Hernia (Inguinal)	\$601.02
	Repair Inguinal Hernia, Sliding, Any Age	\$514.86
	Repair Lumbar Hernia Repositioning Of Initial Femoral Crain Hernia Net Trapped	\$607.03
	Repositioning Of Initial Femoral Groin Hernia, Not Trapped Repositioning Of Initial Femoral Groin Hernia, Trapped	\$517.47 \$567.40
	Repositioning Of Initial Femoral Groin Hernia, Not Trapped	\$542.29
	Repositioning Of Recurrent Femoral Groin Hernia, Trapped	\$647.28
	Initial Repair Of Sliding Hernia Of Abdomen, Less Than 3 Cm In Length	\$282.96
49592	Initial Repair Of Entrapped Hernia Of Abdomen, Less Than 3 Cm In Length	\$392.43
49593	Initial Repair Of Sliding Hernia Of Abdomen, 3-10 Cm In Length	\$473.11
49594	Initial Repair Of Entrapped Hernia Of Abdomen, 3-10 Cm In Length	\$614.77
	Initial Repair Of Sliding Hernia Of Abdomen, More Than 10 Cm In Length	\$635.96
	Initial Repair Of Entrapped Hernia Of Abdomen, More Than 10 Cm In Length	\$844.66
	Repair Of Small Omphalocele, With Primary Closure	\$658.41
	Repair Of Fluid Accumulation Or Abdominal Wall Defect At Navel, With Or Without Prosthesis	\$5,005.58
	Repair Of Fluid Accumulation Or Abdominal Wall Defect At Navel, In Operating Room Repair Of Fluid Accumulation Or Abdominal Well Defect At Navel, First Stage	\$1,099.67
	Repair Of Fluid Accumulation Or Abdominal Wall Defect At Navel, First Stage Repair Of Fluid Accumulation Or Abdominal Wall Defect At Navel, Second Stage	\$621.60 \$549.48
	Repair Of Recurrent Sliding Hernia Of Abdomen, Less Than 3 Cm In Length	\$349.46
	Repair Of Recurrent Entrapped Hernia Of Abdomen, Less Than 3 Cm In Length	\$471.90
	Repair Of Recurrent Sliding Hernia Of Abdomen, 3-10 Cm In Length	\$527.88
	Repair Of Recurrent Entrapped Hernia Of Abdomen, 3-10 Cm In Length	\$707.74
49617	Repair Of Recurrent Sliding Hernia Of Abdomen, More Than 10 Cm In Length	\$731.23
49618	Repair Of Recurrent Entrapped Hernia Of Abdomen, More Than 10 Cm In Length	\$1,022.67
	Repair Of Sliding Hernia Next To Stoma	\$617.49
	Repair Of Entrapped Hernia Next To Stoma	\$761.98
	Removal Of Mesh At Same Time As Hernia Repair	\$164.01
	Laparoscopy, Surgical; Repair Initial Inguinal Hernia	\$433.30
	Laparoscopy, Surgical; Repair Recurrent Inguinal Hernia Unlisted Laparoscopy Procedure, Hernioplasty, Herniorrhaphy, Herniotomy	\$551.50
	Suture, Secondary, Of Abdominal Wall For Evisceration Or Dehiscence	\$1,235.25 \$693.87
	Omental Flap, Extra-Abdominal (Eg, For Reconstruction Of Sternal And Chest Wall Defects)	\$1,382.69
	Omental Flap, Intra-Abdominal (List Separately In Addition To Code For Primary Procedure)	\$343.75
	Free Omental Flap With Microvascular Anastomosis	\$1,971.90
49999	Unlisted Procedure, Abdomen, Peritoneum And Omentum	Price By Report
50010	Renal Exploration, Not Necessitating Other Specific Procedures	\$643.27
	Incision And Drainage Of Kidney Abscess, Open Procedure	\$924.27
	Nephrostomy, Nephrotomy With Drainage	
50045	Incision Into Kidney With Exploration	\$841.79
		\$848.23
50060	Nephrolithotomy; Removal Of Calculus	\$848.23 \$1,034.20
50060 50065	Removal Of Kidney Stone With Secondary Operation For Calculus	\$848.23 \$1,034.20 \$1,095.97
50060 50065 50070	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92
50060 50065 50070 50075	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy)	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57
50060 50065 50070 50075 50080	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36
50060 50065 50070 50075 50080 50081	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy)	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44
50060 50065 50070 50075 50080 50081 50100	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36
50060 50065 50070 50075 50080 50100 50120 50125	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55
50060 50065 50070 50075 50080 50081 50100 50120 50125 50130	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53
50060 50065 50070 50075 50080 50081 50100 50120 50125 50130 50135	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg, Secondary Operation, Congenital Kidney Abnormality)	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53 \$1,018.16
50060 50065 50070 50075 50080 50081 50100 50120 50125 50130 50135 50200	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg, Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53 \$938.36 \$1,018.16
50060 50065 50070 50075 50080 50081 50100 50120 50125 50130 50135 50200 50205	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg, Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53 \$938.36 \$1,018.16 \$378.59
50060 50065 50070 50075 50080 50081 50100 50120 50125 50130 50135 50200 50205	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg. Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53 \$938.36 \$1,018.16
50060 50065 50070 50075 50080 50081 50120 50125 50135 50135 50200 50205	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg, Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53 \$938.36 \$1,018.16 \$378.59 \$672.66
50060 50065 50070 50075 50080 50081 50120 50125 50135 50135 50200 50205	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg. Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53 \$938.36 \$1,018.16 \$378.59
50060 50065 50070 50075 50080 50080 50120 50125 50130 50135 50200 50205 50225	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg, Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53 \$938.36 \$1,018.16 \$378.59 \$672.66
50060 50065 50070 50075 50080 50100 50120 50125 50130 50205 50200 50225 50230 50234	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg, Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney, And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53 \$938.36 \$1,018.16 \$378.59 \$672.66 \$950.64
50060 50065 50070 50075 50080 50100 50120 50125 50130 50205 50200 50225 50230 50234	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg, Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$663.29 \$893.53 \$938.36 \$1,018.16 \$378.59 \$672.66 \$950.64
50060 50065 50070 50075 50081 50120 50125 50130 50135 50200 50225 50220 50230 50234 50236 50240	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg, Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Nephrectomy, Partial	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53 \$938.36 \$1,018.16 \$378.59 \$672.66 \$950.64 \$1,085.47
50060 50065 50070 50075 50080 50100 50120 50125 50135 50200 50225 50225 50230 50230 50230 50230 50230 50230 50240 50250	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg, Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Nephrectomy, Partial Destruction Of 1 Or More Growths In Kidney, Open Procedure	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53 \$938.36 \$1,018.16 \$378.59 \$672.66 \$950.64 \$1,085.47 \$1,156.46 \$1,180.34 \$1,329.20 \$1,337.33
50060 50065 50070 50075 50080 50120 50125 50130 50135 50200 50220 50225 50230 50234 50240 50250 50240 50250	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg. Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Nephrectomy, Partial Destruction Of 1 Or More Growths In Kidney, Open Procedure Removal Or Unroofing Of Kidney Cysts	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53 \$938.36 \$1,018.16 \$378.59 \$672.66 \$950.64 \$1,085.47 \$1,156.46 \$1,180.34 \$1,329.20 \$1,337.33 \$1,105.14 \$869.33
50060 50065 50070 50075 50080 50120 50125 50130 50135 50200 50225 50230 50234 50236 50240 5025 5025 50230 50234 5025 5	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghom Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg, Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Nephrectomy, Partial Destruction Of 1 Or More Growths In Kidney, Open Procedure Removal Or Unroofing Of Kidney Cysts Excision Of Perinephric Cyst	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$663.29 \$893.53 \$938.36 \$1,018.16 \$378.59 \$672.66 \$950.64 \$1,186.47 \$1,156.46 \$1,180.34 \$1,329.20 \$1,337.33 \$1,105.14 \$869.33 \$818.00
50060 50065 50070 50075 50080 50120 50125 50130 50135 50200 50225 50230 50234 50236 50240 5025 5025 50230 50234 5025 5	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg. Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Nephrectomy, Partial Destruction Of 1 Or More Growths In Kidney, Open Procedure Removal Or Urroofing Of Kidney Cysts Excision Of Perinephric Cyst Removal Of Donor Kidney, Open Procedure	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53 \$938.36 \$1,018.16 \$378.59 \$672.66 \$950.64 \$1,085.47 \$1,156.46 \$1,180.34 \$1,329.20 \$1,337.33 \$1,105.14 \$869.33
50060 50065 50070 50075 50081 50120 50125 50130 50205 50220 50225 50230 50234 50234 50236 50240 50250 50250 50290 50290 50290 50290	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Prainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg. Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Nephrectomy, Partial Destruction Of 1 Or More Growths In Kidney, Open Procedure Removal Of Urnorfing Of Kidney Open Procedure Becoval Of Donor Kidney, Open Procedure Becoval Of Donor Kidney, Open Procedure Backbench Standard Preparation Of Cadaver Donor Renal Allograft Prior To Transplantation, Including Dis	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$993.53 \$938.36 \$1,018.16 \$378.59 \$672.66 \$950.64 \$1,085.47 \$1,180.34 \$1,329.20 \$1,337.33 \$1,105.14 \$869.33 \$818.00 \$1,358.83
50060 50065 50070 50075 50081 50120 50125 50130 50205 50200 50225 50230 50234 50234 50240 50250 50280 50280 50290 50320	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg., Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Nephrectomy, Partial Destruction Of 1 Or More Growths In Kidney, Open Procedure Removal Of Urinoring Of Kidney, Open Procedure Removal Of Urinoring Of Kidney, Open Procedure Removal Of Donor Kidney, Open Procedure	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53 \$1,018.16 \$378.59 \$672.66 \$950.64 \$1,085.47 \$1,156.46 \$1,180.34 \$1,329.20 \$1,337.33 \$1,105.14 \$869.33 \$818.00 \$1,358.83
50060 50065 50070 50075 50080 50120 50125 50130 50135 50200 50225 50220 50225 50230 50234 50236 50240 50250 50280 50290 50320 50	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Prainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg. Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Nephrectomy, Partial Destruction Of 1 Or More Growths In Kidney, Open Procedure Removal Of Urnorfing Of Kidney Open Procedure Becoval Of Donor Kidney, Open Procedure Becoval Of Donor Kidney, Open Procedure Backbench Standard Preparation Of Cadaver Donor Renal Allograft Prior To Transplantation, Including Dis	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53 \$938.36 \$1,018.16 \$378.59 \$672.66 \$950.64 \$1,085.47 \$1,156.46 \$1,180.34 \$1,329.20 \$1,337.33 \$818.00 \$1,358.83
50060 50065 50070 50075 50080 50100 50120 50125 50130 50135 50200 50205 50225 50230 50230 50240 50250 50250 50250 50280 50290 50320 50323 50325 50323	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Removal Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Brainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg. Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Nephrectomy, Partial Destruction Of 1 Or More Growths In Kidney, Open Procedure Removal Of Urnoofing Of Kidney Cysts Excision Of Perinephric Cyst Removal Of Unroofing Of Kidney Cysts Excision Of Perinephric Cyst Removal Of Donor Kidney, Open Procedure Backbench Standard Preparation Of Cadaver Donor Renal Allograft Pr	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53 \$938.36 \$1,018.16 \$378.59 \$672.66 \$950.64 \$1,186.47 \$1,156.46 \$1,180.34 \$1,329.20 \$1,337.33 \$11,05.14 \$869.33 \$818.00 \$1,358.83
50060 50065 50070 50075 50080 50120 50125 50130 50135 50200 50220 50225 50230 50234 50236 50240 50250 50250 50250 50230 50	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Cemoval Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Beauty Operation Incision Into Renal Pelvis Of A Kidney With Beauty Operation Incision Into Renal Pelvis Of A Kidney With Beauty Operation Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg. Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Removal Of Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Removal Of Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Removal Of Urinary Duct (Ureter) With Partial Removal Of Bladder	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$863.29 \$893.53 \$338.36 \$1,018.16 \$378.59 \$672.66 \$950.64 \$1,180.34 \$1,156.46 \$1,180.34 \$1,329.20 \$1,337.33 \$1,105.14 \$869.33 \$818.00 \$1,358.83
50060 50065 50070 50070 50070 50081 50120 50125 50130 50205 50220 50225 50230 50234 50234 50236 50240 50250 50	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Cemoval Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg., Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney Kidney Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney, And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Nephrectomy, Partial Destruction Of 1 Or More Growths In Kidney, Open Procedure Removal Of Vidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Nephrectomy, Partial Destruction Of 1 Or More Growths In Kidney, Open Procedure Removal Of Uronofing Of Kidney Cysts Excision Of Perinephric Cyst Removal Of Donor Kidney Por Transplantation, Open Or Endoscopic Procedure Preparation Of Donor Kidney For Transplantation, Venous Connection	\$848.23 \$1,034.20 \$1,095.97 \$1,074.92 \$1,320.57 \$877.36 \$1,288.44 \$963.55 \$663.29 \$893.53 \$1,018.16 \$378.59 \$672.66 \$950.64 \$1,085.47 \$1,156.46 \$1,180.34 \$1,329.20 \$1,337.33 \$1,105.14 \$869.33 \$818.00 \$1,358.83
50060 50065 50070 50075 50080 50120 50125 50125 50205 50220 50225 50230 50234 50234 50236 50240 50250 50	Removal Of Kidney Stone With Secondary Operation For Calculus Nephrolithotomy; Complicated By Congenital Kidney Abnormality Nephrolithotomy; Cemoval Of Large Staghorn Calculus Filling Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) Incision Into Renal Pelvis Of A Kidney With Exploration Incision Into Renal Pelvis Of A Kidney With Drainage Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus Pyelotomy; Complicated (Eg. Secondary Operation, Congenital Kidney Abnormality) Needle Biopsy Of Kidney, Accessed Through The Skin Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Nephrectomy, Partial Destruction Of 1 Or More Growths In Kidney, Open Procedure Removal Of Urinoring Of Kidney Cysts Excision Of Perinephric Cyst Removal Of Donor Kidney, Open Procedure Backbench Standard Preparation Of Cadaver Donor Renal Allograft Prior To Transplantation, Including Dissection And Removal Of Perinephric Fat, Diaphragmatic And Retroperitioneal Attachments, Excision Of Adrenal Gland, And Preparation Of Ureter(S), Re Preparation Of Donor Kidney For Transplantation, Open Or	\$848.2: \$1,034.2: \$1,095.9: \$1,074.9: \$1,320.5: \$877.3: \$1,288.4: \$963.5: \$863.2: \$893.5: \$938.3: \$1,018.1: \$378.5: \$672.6: \$950.6: \$1,156.4: \$1,156.4: \$1,150.1: \$1,329.2: \$1,337.3: \$1,105.1: \$869.3: \$818.0: \$1,358.8: \$255.6: \$511.3: \$210.3: \$166.0: \$157.9:

50365 F 50370 F 50380 F	Description	Fee
50370 F	Renal Homotransplantation, Implantation Of Graft With Recipient Nephrectomy	\$2,582.43
50380 l	Removal Of Transplanted Renal Allograft	\$1,086.97
	Renal Autotransplantation, Reimplantation Of Kidney	\$1,336.05
	Removal And Replacement Of Indwelling Stent In Urinary Duct (Ureter) Including Radiological Supervision And Interpretation, Accessed	ψ1,000.00
	Through The Skin	\$1,008.35
	Removal Of Indwelling Stent In Urinary Duct (Ureter) Including Radiological Supervision And Interpretation, Accessed Through The Skin	\$861.48
	Removal (Via Snare/Capture) And Replacement Of Internally Dwelling Ureteral Stent Via Transurethral Approach, Without Use Of Cystoscopy,	φου1.40
	Including Radiological Supervision And Interpretation	\$1,013.55
	Removal (Via Snare/Capture) Of Internally Dwelling Ureteral Stent Via Transurethral Approach, Without Use Of Cystoscopy, Including	ψ1,010.00
	Radiological Supervision And Interpretation	\$747.84
	Removal And Replacement Of Stent In Kidney And Urinary Duct (Ureter) Using Fluoroscopic Guidance Including Radiological Supervision And	*
	Interpretation	\$564.09
50389	Removal Of Nephrostomy Tube, Requiring Fluoroscopic Guidance (Eg, With Concurrent Indwelling Ureteral Stent)	\$349.68
50390	Aspiration And/Or Injection Kidney Cyst, Accessed Through The Skin	\$96.15
50391	Instillations Of Drug Into Kidney And/Or Urinary Duct (Ureter)	\$115.76
50396	Manometric Studies Through Nephrostomy Or Pyelostomy Tube, Or Indwelling Ureteral Catheter	\$106.69
	Pyeloplasty; (Foley Y-Pyeloplasty), Plastic Operation On Renal Pelvis, With Or Without Plastic Operation On Ureter, Nephropexy, Nephrostomy,	
	Pyelostomy, Or Ureteral Splinting	\$1,165.36
50405 I	Pyeloplasty; Complicated (Congenital Kidney Abnormality, Secondary Pyeloplasty, Solitary Kidney)	\$1,405.56
	Injection Procedure For X-Ray Imaging Of Kidney And Urinary Duct (Ureter) Using Imaging Guidance Including Radiological Supervision And	
	Interpretation, New Access	\$628.78
	Injection Procedure For X-Ray Imaging Of Kidney And Urinary Duct (Ureter) Using Imaging Guidance Including Radiological Supervision And	
50431 I	Interpretation, Existing Access	\$237.77
	Placement Of Catheter Of Kidney, Accessed Through The Skin Using Imaging Guidance With Radiological Supervision And Interpretation	\$931.80
	Placement Of Catheter Of Kidney And Urinary Tube (Ureter), Accessed Through The Skin Using Imaging Guidance With Radiological	
	Supervision And Interpretation	\$1,254.98
	Conversion Of Nephrostomy Catheter To Nephroureteral Catheter Accessed Through The Skin Using Imaging Guidance With Study Of Kidney	6040 74
	And Ureter And Radiological Supervision And Interpretation Replacement Of Kidney Drainage Catheter Accessed Through The Skin With Imaging And Radiological Supervision And Interpretation	\$910.71 \$522.05
	Enlargement Of Existing Opening Into Urinary Tract Accessed Through Skin Using Imaging Guidance	• • • • • • • • • • • • • • • • • • • •
	Enlargement Of Existing Opening Into Urinary Tract Accessed Through Skin And Creation Of New Access Into Urine Collecting System Of	\$136.82
	Kidney, Using Imaging Guidance	\$226.29
	Nephrorrhaphy, Suture Of Kidney Wound Or Injury	\$1,112.35
	Closure Of Nephrocutaneous Or Pyelocutaneous Fistula	\$1,031.61
	Closure Of Abnormal Drainage Tract From Kidney To Other Abdominal Organ, Abdominal Approach	\$1,305.53
	Closure Of Abnormal Drainage Tract From Kidney To Other Abdominal Organ, Thoracic Approach	\$1,396.87
30320	Glosule of Abholiniar Drainage Tract From Kluney To Other Abbonishar Organ, Frioracic Approach	\$1,390.07
50540	Symphysiotomy For Horseshoe Kidney With Or Without Pyeloplasty And/Or Other Plastic Procedure, Unilateral Or Bilateral (One Operation)	\$1,040.85
	Laparoscopy, Surgical; Ablation Of Renal Cysts	\$832.01
303411	Eaplardscopy, Odigical, Abilation of Nortal Oysts	ψ032.01
50542	Laparoscopy, Surgical; Ablation Of Renal Mass Lesion(S), Including Intraoperative Ultrasound Guidance And Monitoring, When Performed	\$1,058.78
	Laparoscopy, Surgical; Partial Nephrectomy	\$1,501.73
	Laparoscopy, Surgical; Pyeloplasty	\$1,249.92
	Removal Of Kidney And Lymph Nodes Using An Endoscope	\$1,343.04
	Laparoscopy, Surgical; Nephrectomy, Including Partial Ureterectomy	\$1,210.69
	Laparoscopy, Surgical; Donor Nephrectomy (Including Cold Preservation), From Living Donor	\$1,688.87
	Laparoscopy, Surgical; Nephrectomy With Total Ureterectomy	\$1,350.33
50549	Unlisted Laparoscopy Procedure, Renal	Price By Report
-	Renal Endoscopy Through Established Nephrostomy Or Pyelostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive	
	Of Radiologic Service; Office	\$332.56
-	Renal Endoscopy Through Established Nephrostomy Or Pyelostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive	
50553	Of Radiologic Service; With Ureteral Catheterization, Office	\$356.13
	Renal Endoscopy Through Established Nephrostomy Or Pyelostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive	
	Of Radiologic Service; With Biopsy, Office	\$378.93
	Renal Endoscopy Through Established Nephrostomy Or Pyelostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive	
	Of Radiologic Service; With Fulguration, With Or Without Biopsy, Office	\$385.59
	Renal Endoscopy Through Established Nephrostomy Or Pyelostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive	_
	Of Radiologic Service; With Removal Of Foreign Body Or Calculus, Office	\$436.65
	Renal Endoscopy Through Established Nephrostomy Or Pyelostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive	****
	Of Radiologic Service; With Resection Of Tumor	\$521.21
	Renal Endoscopy Through Nephrotomy Or Pyelotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic	****
	Service;	\$441.12
	Insertion Of Catheter Into Urinary Duct (Ureter) Using An Endoscope Through The Upper Kidney Area Renal Endoscopy Through Nephrotomy Or Pyelotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic	\$477.25
	Service; With Biopsy	\$507.26
	Renal Endoscopy Through Nephrotomy Or Pyelotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic	φουτ.26
	Service; With Endopyelotomy (Includes Cystoscopy, Ureteroscopy, Dilation Of Ureter And Ureteral Pelvic Junction, In	\$640.85
	Renal Endoscopy Through Nephrotomy Or Pyelotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic	ψ040.00
	Service; With Fulguration, With Or Without Biopsy	\$505.95
	Renal Endoscopy Through Nephrotomy Or Pyelotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic	ψ000.00
11	Service; With Removal Of Foreign Body Or Calculus	\$545.02
	Lithotripsy, Extracorporeal Shock Wave	\$771.28
50580		
50580 50590	Destruction Of 1 Or More Growths In One Kidney, Accessed Through The Skin	\$2,880 41
50580 5 50590 I 50592 I	Destruction Of 1 Or More Growths In One Kidney, Accessed Through The Skin Destruction Of Growths In One Kidney, Accessed Through The Skin	\$2,880.41 \$4.279.14
50580 5 50590 L 50592 L 50593 L	Destruction Of Growths In One Kidney, Accessed Through The Skin	\$4,279.14
50580 S 50590 I 50592 I 50593 I 50600 I		

Code	Description	Fee
	Ureterolithotomy; Upper One-Third Of Ureter	\$857.84
	Ureterolithotomy; Middle One-Third Of Ureter	\$820.73
50630	Ureterolithotomy; Lower One-Third Of Ureter	\$811.14
50650	Ureterectomy, With Bladder Cuff (Separate Procedure)	\$942.78
50660	Ureterectomy, Total, Ectopic Ureter, Combination Abdominal, Vaginal And/Or Perineal Approach	\$1,037.25
50684	Injection Procedure For Ureterography Or Ureteropyelography Through Ureterostomy Or Indwelling Ureteral Catheter	\$123.66
50686	Manometric Studies Through Ureterostomy Or Indwelling Ureteral Catheter	\$134.61
50688	Change Of Ureterostomy Tube Or Externally Accessible Ureteral Stent Via Ileal Conduit	\$70.91
50690	Injection Of Bladder And Urinary Duct (Ureter) For X-Ray Imaging	\$106.55
	Placement Of Stent Of Urinary Duct (Ureter), Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation,	
50693	With Existing Access Site	\$1,169.77
	Placement Of Stent Of Urinary Duct (Ureter), Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation,	
50694	With New Access Site Without Separate Catheter	\$1,286.32
	Placement Of Stent Of Urinary Duct (Ureter), Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation,	
	With New Access Site And Separate Catheter	\$1,338.80
	Ureteroplasty, Plastic Operation On Ureter (Eg, Stricture)	\$842.44
50705	Occlusion Of Urinary Duct (Ureter) Using Imaging Guidance With Radiological Supervision And Interpretation	\$1,865.66

	Balloon Dilation Treatment Of Stricture Of Urinary Duct (Ureter) Using Imaging Guidance With Radiological Supervision And Interpretation	\$841.70
	Ureterolysis, With Or Without Repositioning Of Ureter For Retroperitoneal Fibrosis	\$1,085.33
	Ureterolysis For Ovarian Vein Syndrome	\$925.18
	Ureterolysis For Retrocaval Ureter, With Reanastomosis Of Upper Urinary Tract Or Vena Cava	\$1,000.03
	Revision Of Urinary-Cutaneous Anastomosis (Any Type Urostomy);	\$468.36
	Revision Of Urinary-Cutaneous Anastomosis (Any Type Urostomy); With Repair Of Fascial Defect And Hernia	\$662.58
	Connection Of Urinary Duct (Ureter) To Kidney To Dilated Upper End Of Urine Collecting Duct Within Kidney (Renal Pelvis)	\$1,088.55
	Connection Of Urinary Duct (Ureter) To Kidney To Urine-Collecting Space Within Kidney (Renal Calyx)	\$1,046.20
	Ureteroureterostomy	\$1,135.58
	Transureteroureterostomy, Anastomosis Of Ureter To Contralateral Ureter	\$1,046.20
	Ureteroneocystostomy; Anastomosis Of Single Ureter To Bladder	\$1,114.75
	Ureteroneocystostomy; Anastomosis Of Duplicated Ureter To Bladder	\$1,084.59
	Ureteroneocystostomy; With Extensive Ureteral Tailoring	\$1,022.85
	Ureteroneocystostomy; With Vesico-Psoas Hitch Or Bladder Flap	\$1,099.09
50800	Ureteroenterostomy, Direct Anastomosis Of Ureter To Intestine	\$840.71
50040	Connection Of Urinary Duct (Urteter) To Large Bowel With Creation Of Intestinal Reservoir For Urine And Opening From Reservoir Through Wall	04.054.74
	Of Abdomen Or Region Between Thighs	\$1,251.71
	Connection Of Urinary Duct (Ureter) To Large Bowel	\$1,112.65
50820	Ureteroileal Conduit (Ileal Bladder), Including Intestine Anastomosis (Bricker Operation)	\$1,321.24
FOODE	Continent Diversion, Including Intestine Anastomosis Using Any Segment Of Small And/Or Large Intestine (Kock Pouch Or Camey Enterocystoplasty)	¢4 402 22
50825	Urinary Undiversion (Eg, Taking Down Of Ureteroileal Conduit, Ureterosigmoidostomy Or Ureteroenterostomy With Ureteroureterostomy Or	\$1,492.23
50020	Ureteroneo- Cystostomy)	\$1,631.27
	Replacement Of All Or Part Of Ureter By Intestine Segment, Including Intestine Anastomosis	\$1,118.32
	Cutaneous Appendico-Vesicostomy	\$1,110.32
	Ureterostomy, Transplantation Of Ureter To Skin	\$955.45
	Ureterorrhaphy, Suture Of Ureter (Separate Procedure)	\$768.01
	Closure Of Ureterocutaneous Fistula	\$802.49
	Closure Of Ureterovisceral Fistula (Including Visceral Repair)	\$999.71
	Deligation Of Ureter	\$808.06
	Laparoscopy, Surgical, Ureterolithotomy	\$881.11
	Laparoscopy, Surgical; Ureteroneocystostomy With Cystoscopy And Ureteral Stent Placement	\$1,394.10
	Laparoscopy, Surgical; Ureteroneocystostomy Without Cystoscopy And Ureteral Stent Placement	\$1,153.76
	Unlisted Laparoscopy Procedure, Ureter	Price By Report
33010	Ureteral Endoscopy Through Established Ureterostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic	Sy report
50951	Service: Office	\$348.81
23001	Urreteral Endoscopy Through Established Ureterostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic	ψο 10.01
50953	Service; With Ureteral Catheterization, Office	\$368.68
23000	Ureteral Endoscopy Through Established Ureterostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic	Ψ000.00
50955	Service; With Biopsy, Office	\$392.57
30000	Ureteral Endoscopy Through Established Ureterostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic	\$00 2. 01
50957	Service; With Fulguration, With Or Without Biopsy, Office	\$396.17
22307	Ureteral Endoscopy Through Established Ureterostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic	+000.11
50961	Service; With Removal Of Foreign Body Or Calculus, Office	\$358.21
		+000.21
50970	Ureteral Endoscopy Through Ureterotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic Service;	\$333.19
	Insertion Of Catheter Into Urinary Duct (Ureter) Using An Endoscope Through The Mid Ureter Level	\$322.06
	Ureteral Endoscopy Through Ureterotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic Service; With	, ===.30
50974	Biopsy	\$424.75
	Ureteral Endoscopy Through Ureterotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic Service; With	
50976	Fulguration, With Or Without Biopsy	\$418.64
	Ureteral Endoscopy Through Ureterotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic Service; With	
50980	Removal Of Foreign Body Or Calculus	\$320.10
51020	Cystotomy Or Cystostomy; With Fulguration And/Or Insertion Of Radioactive Material	\$431.45
	Cystotomy Or Cystostomy; With Cryosurgical Destruction Of Intravesical Lesion	\$434.49
51040	Cystostomy, Cystotomy With Drainage	\$297.62
	Cystotomy, With Insertion Of Ureteral Catheter (Separate Procedure)	\$459.23
51050	Cystolithotomy, Cystotomy With Removal Of Calculus, Without Vesical Neck Resection	\$431.67
	Transvesical Ureterolithotomy	\$533.37

Codo	Description	Foo
	Description Cystotomy, With Calculus Basket Extraction And/Or Ultrasonic Or Electrohydraulic Fragmentation Of Ureteral Calculus	Fee \$531.08
	Drainage Of Perivesical Or Prevesical Space Abscess	\$374.91
	Aspiration Of Bladder; By Needle	\$69.70
	Aspiration Of Bladder; By Trocar Or Intracatheter	\$151.35
	Aspiration Of Bladder; With Insertion Of Suprapubic Catheter	\$168.85
	Excision Of Urachal Cyst Or Sinus, With Or Without Umbilical Hernia Repair	\$647.44
	Cystotomy; For Simple Excision Of Vesical Neck (Separate Procedure)	\$545.15
	Cystotomy; For Excision Of Bladder Diverticulum, Single Or Multiple (Separate Procedure)	\$781.89
	Cystotomy; For Excision Of Bladder Tumor	\$702.43
	Incision, Removal, Or Repair Of Abnormal Drainage Tract From Bladder Into Bowel	\$710.71
	Partial Removal Of Bladder, Simple	\$872.79
	Partial Removal Of Bladder, Complicated	\$1,142.77
	Cystectomy, Partial, With Reimplantation Of Ureter(S) Into Bladder (Ureteroneocystostomy)	\$1,170.17
	Complete Removal Of Bladder	\$1,479.95
	Complete Removal Of Bladder And Lymph Nodes On Both Sides Of Pelvis	\$1,647.16
	Complete Removal Of Bladder With Transplantation Of Urinary Ducts (Ureters)	\$1,717.70
		. ,
51585	Complete Removal Of Bladder With Transplantation Of Urinary Ducts (Ureters) And Removal Of Lymph Nodes On Both Sides Of Pelvis	\$1,910.33
51590	Cystectomy, Complete, With Ureteroileal Conduit Or Sigmoid Bladder, Including Intestine Anastomosis;	\$1,746.06
	Cystectomy, Complete, With Ureteroileal Conduit Or Sigmoid Bladder, Including Bowel Anastomosis; With Bilateral Pelvic Lymphadenectomy,	
51595	Including External Iliac, Hypogastric And Obturator Nodes	\$1,976.40
	Removal Of Bladder And Lymph Nodes On Both Sides Of Pelvis With Transplantation Of Urinary Ducts (Ureters) To Small And/Or Large Bowel	
51596	With Creation Of Urinary Opening, Open Procedure	\$2,128.97
	Removal Of Bladder, Urinary Ducts (Ureters)	\$2,306.80
	Injection Procedure For Cystography Or Voiding Urethrocystography	\$235.14
51605	Injection Procedure For X-Ray Imaging Of The Bladder And Bladder Canal (Urethra)	\$35.03
	Injection Procedure For Retrograde Urethrocystography	\$91.57
51700	Bladder Irrigation, Simple, Lavage And/Or Instillation	\$81.07
51701	Insertion Of Non-Indwelling Bladder Catheter (Eg, Straight Catheterization For Residual Urine)	\$46.43
51702	Insertion Of Indwelling Bladder Catheter, Simple	\$65.56
51703	Insertion Of Indwelling Bladder Catheter, Complicated	\$152.88
51705	Simple Change Of Bladder Tube	\$102.04
51710	Complicated Change Of Bladder Tube	\$94.71
51715	Injection Of Implant Material Beneath Lining Of Bladder And/Or Bladder Canal (Urethra) Using Endoscope	\$266.15
51720	Instillation Of Anti-Cancer Drug Into Bladder	\$77.77
51725	Simple Measurement Of Pressure Of Urine Flow In Bladder (Cystometrogram)	\$162.73
51726	Complex Measurement Of Pressure Of Urine Flow In Bladder (Cystometrogram)	\$294.51
51727	Complex Measurement Of Pressure Of Urine Flow In Bladder (Cystometrogram) With Bladder Canal (Urethra) Pressure Studies	\$354.82
51728	Complex Measurement Of Pressure Of Urine Flow In Bladder (Cystometrogram) With Voiding Pressure Studies	\$318.01
	Complex Measurement Of Pressure Of Urine Flow In Bladder (Cystometrogram) With Bladder Canal (Urethra) Pressure And Voiding Pressure	
51729	Studies	\$343.13
51736	Simple Uroflowmetry (Ufr) (Eg, Stop-Watch Flow Rate, Mechanical Uroflowmeter)	\$13.69
51741	Electronic Assessment Of Bladder Emptying	\$14.19
51784	Electromyography Studies (Emg) Of Anal Or Urethral Sphincter, Other Than Needle, Any Technique	\$66.91
51785	Needle Electromyography Studies (Emg) Of Anal Or Urethral Sphincter, Any Technique	\$314.88
51792	Assessment Of Muscle Signal Of Pelvic Nerves	\$194.86
51797	Voiding Pressure Studies, Intra-Abdominal (Ie, Rectal, Gastric, Intraperitoneal) (List Separately In Addition To Code For Primary Procedure)	\$206.02
51798	Measurement Of Post-Voiding Residual Urine And/Or Bladder Capacity By Ultrasound, Non-Imaging	\$11.03
	Cystoplasty Or Cystourethroplasty, Plastic Operation On Bladder And/Or Vesical Neck (Anterior Y-Plasty, Vesical Fundus Resection), Any	
51800	Procedure, With Or Without Wedge Resection Of Posterior Vesical Neck	\$943.60
51820	Repair Of Bladder, Bladder Canal (Urethra) And Urinary Duct (Ureter)	\$986.92
	Anterior Vesicourethropexy, Or Urethropexy (Eg, Marshall-Marchetti-Krantz, Burch); Simple	\$641.09
	Anterior Vesicourethropexy, Or Urethropexy (Marshall-Marchetti-Krantz Type); Complicated (Eg, Secondary Repair)	\$741.56
51845	Abdomino-Vaginal Vesical Neck Suspension, With Or Without Endoscopic Control (Eg, Starney, Raz, Modified Pereyra)	\$532.94
51860	Suture Of Wound, Injury, Or Rupture Of The Bladder	\$786.98
51865	Suture Of Wound, Injury, Or Rupture Of Bladder	\$905.98
51880	Closure Of Cystostomy (Separate Procedure)	\$472.04
51900	Repair Of Abnormal Drainage Tract From Bladder Into The Vagina, Abdominal Approach	\$751.20
51920	Closure Of Vesicouterine Fistula;	\$696.42
51925	Closure Of Vesicouterine Fistula; With Hysterectomy	\$990.22
51040	0.000	\$1,652.22
01940	Closure, Exstrophy Of Bladder	
	Closure, Exstrophy Of Bladder Enterocystoplasty, Including Intestinal Anastomosis	\$1,257.03
51960		
51960 51980	Enterocystoplasty, Including Intestinal Anastomosis	\$1,257.03
51960 51980 51990	Enterocystoplasty, Including Intestinal Anastomosis Cutaneous Vesicostomy	\$1,257.03 \$745.31
51960 51980 51990 51992	Enterocystoplasty, Including Intestinal Anastomosis Cutaneous Vesicostomy Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence	\$1,257.03 \$745.31 \$678.88
51960 51980 51990 51992 51999	Enterocystoplasty, Including Intestinal Anastomosis Cutaneous Vesicostomy Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic)	\$1,257.03 \$745.31 \$678.88 \$758.51
51960 51980 51990 51992 51999 52000	Enterocystoplasty, Including Intestinal Anastomosis Cutaneous Vesicostomy Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic) Unlisted Laparoscopy Procedure, Bladder	\$1,257.03 \$745.31 \$678.88 \$758.51 Price By Report
51960 51980 51990 51992 51999 52000 52001	Enterocystoplasty, Including Intestinal Anastomosis Cutaneous Vesicostomy Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic) Unlisted Laparoscopy Procedure, Bladder Cystourethroscopy (Separate Procedure), Office;	\$1,257.03 \$745.31 \$678.88 \$758.51 Price By Report \$239.24
51960 51980 51990 51992 51999 52000 52001	Enterocystoplasty, Including Intestinal Anastomosis Cutaneous Vesicostomy Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic) Unlisted Laparoscopy Procedure, Bladder Cystourethroscopy (Separate Procedure), Office; Cystourethroscopy With Irrigation And Evacuation Of Multiple Obstructing Clots	\$1,257.03 \$745.31 \$678.88 \$758.51 Price By Report \$239.24 \$430.15
51960 51980 51990 51992 51999 52000 52001 52005	Enterocystoplasty, Including Intestinal Anastomosis Cutaneous Vesicostomy Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic) Unlisted Laparoscopy Procedure, Bladder Cystourethroscopy (Separate Procedure), Office; Cystourethroscopy With Irrigation And Evacuation Of Multiple Obstructing Clots	\$1,257.03 \$745.31 \$678.88 \$758.51 Price By Report \$239.24 \$430.15
51960 51980 51990 51992 51999 52000 52001 52005	Enterocystoplasty, Including Intestinal Anastomosis Cutaneous Vesicostomy Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic) Unlisted Laparoscopy Procedure, Bladder Cystourethroscopy (Separate Procedure), Office; Cystourethroscopy With Irrigation And Evacuation Of Multiple Obstructing Clots Insertion Of Catheter Into Urinary Duct (Ureter) Using An Endoscope Through The Bladder Area	\$1,257.03 \$745.31 \$678.88 \$758.51 Price By Report \$239.24 \$430.15 \$345.59
51960 51980 51990 51992 51999 52000 52001 52005 52007 52010	Enterocystoplasty, Including Intestinal Anastomosis Cutaneous Vesicostomy Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic) Unlisted Laparoscopy Procedure, Bladder Cystourethroscopy (Separate Procedure), Office; Cystourethroscopy With Irrigation And Evacuation Of Multiple Obstructing Clots Insertion Of Catheter Into Urinary Duct (Ureter) Using An Endoscope Through The Bladder Area Cystourethroscopy (Separate Procedure), Office; With Ureteral Catheterization And Brush Biopsy Of Ureter Or Renal Pelvis For Cytology	\$1,257.03 \$745.31 \$678.88 \$758.51 Price By Report \$239.24 \$430.15 \$345.59 \$442.09 \$371.23
51960 51980 51990 51992 51999 52000 52001 52005 52007 52010 52204	Enterocystoplasty, Including Intestinal Anastomosis Cutaneous Vesicostomy Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic) Unlisted Laparoscopy Procedure, Bladder Cystourethroscopy (Separate Procedure), Office; Cystourethroscopy With Irrigation And Evacuation Of Multiple Obstructing Clots Insertion Of Catheter Into Urinary Duct (Ureter) Using An Endoscope Through The Bladder Area Cystourethroscopy (Separate Procedure), Office; With Ureteral Catheterization And Brush Biopsy Of Ureter Or Renal Pelvis For Cytology Cystourethroscopy (Separate Procedure), Office; With Ejaculatory Duct Catheterization	\$1,257.03 \$745.31 \$678.88 \$758.51 Price By Report \$239.24 \$430.15 \$345.59 \$442.09 \$371.23 \$271.66
51960 51980 51990 51992 51999 52000 52001 52005 52007 52010 52204	Enterocystoplasty, Including Intestinal Anastomosis Cutaneous Vesicostomy Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic) Unlisted Laparoscopy Procedure, Bladder Cystourethroscopy (Separate Procedure), Office; Cystourethroscopy With Irrigation And Evacuation Of Multiple Obstructing Clots Insertion Of Catheter Into Urinary Duct (Ureter) Using An Endoscope Through The Bladder Area Cystourethroscopy (Separate Procedure), Office; With Ureteral Catheterization And Brush Biopsy Of Ureter Or Renal Pelvis For Cytology Cystourethroscopy (Separate Procedure), Office; With Ejaculatory Duct Catheterization Cystourethroscopy, With Biopsy; Office	\$1,257.03 \$745.31 \$678.88 \$758.51 Price By Report \$239.24 \$430.15 \$345.59 \$442.09 \$371.23

Code Description Cystourethroscopy, With Fulguration (Including Cryosurgery Or Laser Surgery) And/Or Resection Of; Small Bladder Tumor(S) (0.5 Up To 2.0 52234 Cm) 52234 Cm) 52235 Cystourethroscopy, With Fulguration (Including Cryosurgery) And/Or Resection Of; Medium Bladder Tumor(S) (2.0 To 5.0 Cm) 52240 Cystourethroscopy, With Fulguration (Including Cryosurgery) And/Or Resection Of; Large Bladder Tumor(S) (2.0 To 5.0 Cm) 52250 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; General Or Conduction (Spinal) Anesthesia 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; General Or Conduction (Spinal) Anesthesia 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; Local Anesthesia 52270 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Female 52271 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52275 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52276 Cystourethroscopy, With Direct Vision Internal Urethrotomy Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Insertion Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Insertion Of Permanent Of Urethral Stricture Using An Endoscope Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52280 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy, With Injection Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Crtopi	\$245.79 \$287.98 \$391.43 \$215.22 \$210.51 \$267.05 \$410.06 \$525.02 \$264.10 \$290.51 \$351.54 \$301.97 \$248.92 \$2,358.62
52234 Cm) 52235 Cystourethroscopy, With Fulguration (Including Cryosurgery) And/Or Resection Of; Medium Bladder Tumor(S) (2.0 To 5.0 Cm) 52240 Cystourethroscopy, With Fulguration (Including Cryosurgery) And/Or Resection Of; Large Bladder Tumor(S) 52250 Cystourethroscopy With Insertion Of Radioactive Substance, With Or Without Biopsy Or Fulguration 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; General Or Conduction (Spinal) Anesthesia 52265 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; Local Anesthesia 52276 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Female 52275 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52276 Cystourethroscopy With Direct Vision Internal Urethrotomy 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy; With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bladder 52200 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$287.98 \$391.43 \$215.22 \$210.51 \$267.05 \$410.06 \$525.02 \$264.10 \$290.51 \$351.54 \$301.97 \$248.92 \$2,358.62 \$272.53 \$406.16 \$219.25
52235 Cystourethroscopy, With Fulguration (Including Cryosurgery) And/Or Resection Of; Medium Bladder Tumor(S) (2.0 To 5.0 Cm) 52240 Cystourethroscopy, With Fulguration (Including Cryosurgery) And/Or Resection Of; Large Bladder Tumor(S) 52250 Cystourethroscopy, With Insertion Of Radioactive Substance, With Or Without Biopsy Or Fulguration 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; General Or Conduction (Spinal) Anesthesia 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; Local Anesthesia 52270 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Female 52275 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52276 Cystourethroscopy With Direct Vision Internal Urethrotomy 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy; With Injection (S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$287.98 \$391.43 \$215.22 \$210.51 \$267.05 \$410.06 \$525.02 \$264.10 \$290.51 \$351.54 \$301.97 \$248.92 \$2,358.62 \$272.53 \$406.16 \$219.25
52240 Cystourethroscopy, With Fulguration (Including Cryosurgery) And/Or Resection Of, Large Bladder Tumor(S) 52250 Cystourethroscopy With Insertion Of Radioactive Substance, With Or Without Biopsy Or Fulguration 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; General Or Conduction (Spinal) Anesthesia 52261 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; Local Anesthesia 52270 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Female 52271 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52272 Cystourethroscopy With Direct Vision Internal Urethrotomy 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52288 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52289 Cystourethroscopy, With Ureteral Meatotomy, Unilateral Or Bilateral 52200 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Crthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$391.43 \$215.22 \$210.51 \$267.05 \$410.06 \$525.02 \$264.10 \$290.51 \$351.54 \$301.97 \$248.92 \$2,358.62 \$272.53 \$406.16 \$219.25
52250 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; General Or Conduction (Spinal) Anesthesia 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; General Or Conduction (Spinal) Anesthesia 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; Local Anesthesia 52270 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Female 52275 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52276 Cystourethroscopy With Direct Vision Internal Urethrotomy 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52298 Cystourethroscopy, With Ureteral Meatotomy, Uniteral Of The Bladder 52299 Cystourethroscopy; With Ureteral Meatotomy, Uniteral Of The Bladder 52200 Cystourethroscopy; With Ureteral Meatotomy, Uniteral Of Bilateral 52200 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$215.22 \$210.51 \$267.05 \$410.06 \$525.02 \$264.10 \$290.51 \$351.54 \$301.97 \$248.92 \$2,358.62 \$272.53 \$406.16 \$219.25
52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; General Or Conduction (Spinal) Anesthesia 52265 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; Local Anesthesia 52270 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Female 52275 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52276 Cystourethroscopy With Direct Vision Internal Urethrotomy 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$210.51 \$267.05 \$410.06 \$525.02 \$264.10 \$290.51 \$351.54 \$301.97 \$248.92 \$2,358.62 \$272.53 \$406.16 \$219.25
52265 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; Local Anesthesia 52270 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Female 52275 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52276 Cystourethroscopy With Direct Vision Internal Urethrotomy 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$267.05 \$410.06 \$525.02 \$264.10 \$290.51 \$351.54 \$301.97 \$248.92 \$2,358.62 \$272.53 \$406.16 \$219.25
52270 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Female 52275 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52276 Cystourethroscopy With Direct Vision Internal Urethrotomy 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral Section Of Systourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52287 Cystourethroscopy, With Ureteral Meatotomy, Unilateral Or Bilateral 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$410.06 \$525.02 \$264.10 \$290.51 \$351.54 \$301.97 \$248.92 \$2,358.62 \$272.53 \$406.16 \$219.25
Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52276 Cystourethroscopy With Direct Vision Internal Urethrotomy 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral Septal Pibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral Septal Pibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral Septal Pibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral Septal Pibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral Septal Pibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral Septal Pibrosis, Internal Urethroscopy, With Ureteral Meatotomy, Unilateral Or Bilateral Septal Pibrosis, Ureterocele(S), Using An Endoscope Septal Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope Septal Septal Pibrosis Or Multiple	\$525.02 \$264.10 \$290.51 \$351.54 \$301.97 \$248.92 \$2,358.62 \$272.53 \$406.16 \$219.25
52276 Cystourethroscopy With Direct Vision Internal Urethrotomy 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$264.10 \$290.51 \$351.54 \$301.97 \$248.92 \$2,358.62 \$272.53 \$406.16 \$219.25
52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Ureteral Meatotomy, Unilateral Or Bilateral 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$290.51 \$351.54 \$301.97 \$248.92 \$2,358.62 \$272.53 \$406.16 \$219.25
Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Ureteral Meatotomy, Unilateral Or Bilateral 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Crthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$351.54 \$301.97 \$248.92 \$2,358.62 \$272.53 \$406.16 \$219.25
52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$301.97 \$248.92 \$2,358.62 \$272.53 \$406.16 \$219.25
52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$301.97 \$248.92 \$2,358.62 \$272.53 \$406.16 \$219.25
52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$248.92 \$2,358.62 \$272.53 \$406.16 \$219.25
Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Crthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$2,358.62 \$272.53 \$406.16 \$219.25
Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$272.53 \$406.16 \$219.25
52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$406.16 \$219.25
52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$406.16 \$219.25
52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$406.16 \$219.25
52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$219.25
52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$219.25
52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	
52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	ய∠ப்⊓≏
52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple	\$260.49
	\$250.49
DZBTO promovar Or Foreign Dody, Stone, Or Stent From Diaducer Canar (Orethra) Or Diaducer Osing All Effective	\$358.35
52315 Complicated Removal Of Foreign Body, Stone, Or Stent From Bladder Canal (Urethra) Or Bladder Using An Endoscope	\$386.20
52317 Crushing, Fragmenting, And Removal Of (Less Than 2.5 Centimeters) Bladder Stone	\$654.07
52318 Crushing, Fragmenting, And Removal Of Bladder Stones, Complicated Or Larger Than 2.5 Centimeters	\$472.31
52320 Cystourethroscopy (Including Ureteral Catheterization); With Removal Of Ureteral Calculus	\$246.15
Cystourethroscopy (Including Ureteral Catheterization); With Fragmentation Of Ureteral Calculus (Eg, Ultrasonic Or Electro-Hydraulic	
52325 Technique)	\$319.52
52327 Cystourethroscopy (Including Ureteral Catheterization); With Subureteric Injection Of Implant Material	\$261.71
52330 Cystourethroscopy; With Manipulation, Without Removal Of Ureteral Calculus	\$586.96
52332 Cystourethroscopy, With Insertion Of Indwelling Ureteral Stent (Eg, Gibbons Or Double-J Type)	\$436.33
52334 Cystourethroscopy With Insertion Of Ureteral Guide Wire Through Kidney To Establish A Percutaneous Nephrostomy, Retrograde	\$164.46
52341 Endoscope Of The Bladder And Urethra Excluding The Ureter To Treat A Stricture Of Ureter	\$255.15
52342 Cystourethroscopy; With Treatment Of Ureteropelvic Junction Stricture (Eg, Balloon Dilation, Laser, Electrocautery, And Incision)	\$277.75
52343 Endoscope Of The Bladder And Urethra Excluding The Ureter To Treat A Stricture Within The Kidney	\$309.28
52344 Endoscope Of The Bladder, Urethra And Ureter To Treat A Stricture Of Ureter	\$332.09
52345 Endoscope Of The Bladder, Urethra And Ureter To Treat A Stricture Of The Upper Attachment Of The Ureter To The Kidney	\$354.24
52346 Endoscope Of The Bladder, Urethra And Ureter To Treat A Stricture Within The Kidney	\$401.16
52351 Diagnostic Examination Of The Bladder, Bladder Canal (Urethra), And Urinary Duct (Ureter) Or Kidney Using An Endoscope	\$302.17
32331 Diagnostic Examination of the bladder, bladder canal (oretina), And officially Duck (oreter) of Nurrey Using Art Endoscope	φ302.17
FOOTO Chataurethreecony, With Hesterocopy, And/Or Displaceony, With Removal Or Manipulation Of Calculus / Iretard Catheterization In Included)	#252.70
52352 Cystourethroscopy, With Ureteroscopy And/Or Pyeloscopy; With Removal Or Manipulation Of Calculus (Ureteral Catheterization Is Included)	\$353.70
52353 Cystourethroscopy, With Ureteroscopy And/Or Pyeloscopy; With Lithotripsy (Ureteral Catheterization Is Included)	\$391.43
52354 Cystourethroscopy, With Ureteroscopy And/Or Pyeloscopy; With Biopsy And/Or Fulguration Of Ureteral Or Renal Pelvic Lesion	\$416.40
52355 Cystourethroscopy, With Ureteroscopy And/Or Pyeloscopy; With Resection Of Ureteral Or Renal Pelvic Tumor	\$419.51
52356 Crushing Of Stone In Urinary Duct (Ureter) With Stent Using An Endoscope	\$414.95
52400 Incision, Destruction, Or Removal Of Congenital Bladder And Bladder Canal (Urethra) Defects Using An Endoscope	\$433.34
52402 Incision Or Removal Of Ejaculatory Ducts Using An Endoscope, Male	\$238.90
52441 Insertion Of Implant In Bladder Canal (Urethra) Within Prostate Gland Using An Endoscope, Single Implant	\$1,384.44
52442 Insertion Of Implant In Bladder Canal (Urethra) Within Prostate Gland Using An Endoscope, Each Additional Implant	\$977.75
52450 Transurethral Incision Of Prostate	\$434.18
52500 Transurethral Resection Of Bladder Neck (Separate Procedure)	\$450.09
Transurethral Electrosurgical Resection Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy,	
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	\$736.83
52601 Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)	\$736.83
52601 Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)	\$736.83
52601 Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete	
52601 Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)	\$412.68
52601 Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Transurethral Resection; Of Postoperative Bladder Neck Contracture	
52601 Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Transurethral Resection; Of Postoperative Bladder Neck Contracture Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral	\$412.68 \$295.55
52601 Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Transurethral Resection; Of Postoperative Bladder Neck Contracture	\$412.68
Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Transurethral Resection; Of Postoperative Bladder Neck Contracture Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)	\$412.68 \$295.55
Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Easer Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed) Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)	\$412.68 \$295.55 \$1,527.60
Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) 52630 Transurethral Resection; Of Postoperative Bladder Neck Contracture Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)	\$412.68 \$295.55
Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Transurethral Resection; Of Postoperative Bladder Neck Contracture Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed) Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed)	\$412.68 \$295.55 \$1,527.60
Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Transurethral Resection; Of Postoperative Bladder Neck Contracture Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed) Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed) Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy,	\$412.68 \$295.55 \$1,527.60 \$1,573.87
Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Transurethral Resection; Of Postoperative Bladder Neck Contracture Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed) Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed) Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are In	\$412.68 \$295.55 \$1,527.60 \$1,573.87 \$753.04
Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Easer Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed) Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed) Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are In Transurethral Drainage Of Prostatic Abscess	\$412.68 \$295.55 \$1,527.60 \$1,573.87 \$753.04 \$404.28
Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Easer Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed) Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed) Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Section of Prostate Are Included If Performed) Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Transurethral Drainage Of Prostatic Abscess) Transurethral Drainage Of Prostatic Abscess Urethrotomy Or Urethrostomy, External (Separate Procedure); Pendulous Urethra	\$412.68 \$295.55 \$1,527.60 \$1,573.87 \$753.04 \$404.28 \$136.16
Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) 22630 (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) 252640 Transurethral Resection; Of Postoperative Bladder Neck Contracture Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral 252647 Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed) Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral 252648 Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed) Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, 252649 Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are In 252700 Transurethral Drainage Of Prostatic Abscess 3000 Urethrotomy Or Urethrostomy, External (Separate Procedure); Pendulous Urethra 53010 Urethrotomy Or Urethrostomy, External (Separate Procedure); Perineal Urethra, External	\$412.68 \$295.55 \$1,527.60 \$1,573.87 \$753.04 \$404.28
Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Easer Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed) Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed) Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, S2649 Cystourethroscopy, Urethral Calibration And/Or Dilation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Tansurethral Drainage Of Prostatic Abscess) Transurethral Drainage Of Prostatic Abscess Urethrotomy Or Urethrostomy, External (Separate Procedure); Pendulous Urethra	\$412.68 \$295.55 \$1,527.60 \$1,573.87 \$753.04 \$404.28 \$136.16
Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) 52630 (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed) Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed) Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Section of Prostate Are Included Internal Urethrotomy, Internal Urethrotomy, Internal Urethrotomy And Transurethral Resection Of Prostate Are In 52700 Transurethral Drainage Of Prostatic Abscess 53000 Urethrotomy Or Urethrostomy, External (Separate Procedure); Pendulous Urethra, External	\$412.68 \$295.55 \$1,527.60 \$1,573.87 \$753.04 \$404.28 \$136.16 \$272.98
Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) 52640 Transurethral Resection; Of Postoperative Bladder Neck Contracture Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed) Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed) Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are In Section Of Prostate Are In Urethrotomy Or Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are In Urethrotomy Or Urethrostomy, External (Separate Procedure); Pendulous Urethra External 53010 Urethrotomy Or Urethrostomy, External (Separate Procedure), Except Infant; Office	\$412.68 \$295.55 \$1,527.60 \$1,573.87 \$753.04 \$404.28 \$136.16 \$272.98 \$97.13
Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) 52640 Transurethral Resection; Of Postoperative Bladder Neck Contracture Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed) Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed) Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are In 52700 Transurethral Drainage Of Prostatic Abscess 53000 Urethrotomy Or Urethrostomy, External (Separate Procedure); Pendulous Urethra 53010 Urethrotomy Or Urethrostomy, External (Separate Procedure); Perineal Urethra, External 53020 Meatotomy, Cutting Of Meatus (Separate Procedure), Except Infant; Office	\$412.68 \$295.55 \$1,527.60 \$1,573.87 \$753.04 \$404.28 \$136.16 \$272.98 \$97.13 \$61.86 \$359.31
Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included) Transurethral Resection; Of Postoperative Bladder Neck Contracture Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed) Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed) Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Society Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are In Society Of Prostate Are In Society Of Prostate Are In Society Of Prostatic Abscess Transurethral Drainage Of Prostatic Abscess Diethrotomy Or Urethrostomy, External (Separate Procedure); Pendulous Urethra Society Of Meatotomy, Cutting Of Meatus (Separate Procedure), Except Infant; Office Meatotomy, Cutting Of Meatus (Separate Procedure), Except Infant; Office Diation Of Deep Periurethral Abscess	\$412.68 \$295.55 \$1,527.60 \$1,573.87 \$753.04 \$404.28 \$136.16 \$272.98 \$97.13 \$61.86

	Description	Fee
	Biopsy Of Urethra	\$144.70
	Removal Of Bladder And Bladder Canal (Urethra), Female	\$707.46
	Removal Of Bladder And Bladder Canal (Urethra), Male	\$843.56
	Excision Or Fulguration Of Carcinoma Of Urethra	\$413.44
	Excision Of Urethral Diverticulum (Separate Procedure); Female	\$557.10
	Excision Of Urethral Diverticulum (Separate Procedure); Male	\$598.83
	Marsupialization Of Urethral Diverticulum, Male Or Female	\$389.45
	Removal Of Seminal Fluid Gland	\$363.24
	Excision Or Fulguration; Urethral Polyp(S), Distal Urethra	\$191.27
	Excision Or Fulguration; Urethral Caruncle	\$200.08
	Removal Or Destruction Of Bladder Canal (Urethra) Mucous Glands	\$195.85
	Excision Or Fulguration; Urethral Prolapse	\$239.99
	Repair Of Bladder Canal (Urethra) For Abnormal Drainage Tract, Pouching, Or Narrowing	\$728.94
	Urethroplasty; Second Stage (Formation Of Urethra), Including Urinary Diversion	\$795.07
53410	Reconstruction Of Bladder Canal (Urethra), Male	\$891.57
53415	Urethroplasty, Transpubic, One Stage, For Reconstruction Or Repair Of Prostatic Or Membranous Urethra	\$1,026.56
53420	Reconstruction Or Repair Of Prostatic Or Membranous Bladder Canal (Urethra), First Stage	\$765.84
53425	Reconstruction Or Repair Of Prostatic Or Membranous Bladder Canal (Urethra), Second Stage	\$851.73
53430	Reconstruction Of Bladder Canal (Urethra), Female	\$882.40
53431	Repair Of Bladder Canal (Urethra) And/Or Lower Bladder For Incontinence	\$1,046.52
	Sling Operation For Correction Of Male Urinary Incontinence (Eg, Fascia Or Synthetic)	\$686.49
	Removal Or Revision Of Sling For Male Urinary Incontinence (Eg, Fascia Or Synthetic)	\$717.45
	Insertion Of Tandem Cuff (Dual Cuff)	\$723.17
	Insertion Of Inflatable Urethral/Bladder Neck Sphincter, Including Placement Of Pump, Reservoir, And Cuff	\$691.15
	Removal Of Inflatable Urethral/Bladder Neck Sphincter, Including Pump, Reservoir, And Cuff	\$587.94
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53447	Removal And Replacement Of Inflatable Urethral/Bladder Neck Sphincter Including Pump, Reservoir, And Cuff At The Same Operative Session	\$735.82
	Removal And Replacement of Inflatable Bladder Canal (Urethra) or Bladder Neck Sphincter, Through An Infected Field	\$1,159.04
	Repair Of Inflatable Bladder Canal (Urethra) Or Bladder Neck Sphincter, Including Pump, Reservoir, And Cuff	\$560.54
	Urethral Meatoplasty, With Mucosal Advancement	\$352.84
	Insertion Of Adjustable Balloon Continence Device On Both Sides Of Urethra Using Imaging Guidance	Price By Report
	Insertion of Adjustable Balloon Continence Device on Both Sides of Urethra Using Imaging Guidance	
	,	Price By Report
	Removal Of Adjustable Balloon Continence Device From Beside Urethra	Price By Report
	Adjustment Of Fluid Volume In Adjustable Balloon Continence Device Beside Urethra	Price By Report
	Urethral Meatoplasty, With Partial Excision Of Distal Urethral Segment (Richardson Type Procedure)	\$419.13
	Urethrolysis, Transvaginal, Secondary, Open, Including Cystourethroscopy (Eg, Postsurgical Obstruction, Scarring)	\$680.60
	Suture Of Bladder Canal (Urethra) Wound Or Injury, Female	\$444.87
	Suture Of Bladder Canal (Urethra) Wound Or Injury, Penis	\$444.55
	Urethrorrhaphy, Suture Of Urethral Wound Or Injury; Perineal	\$578.22
	Suture Of Bladder Canal (Urethra) Wound Or Injury, Prostate	\$724.91
	Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) To Skin, Male	\$586.57
	Dilation Of Urethral Stricture By Passage Of Sound Or Urethral Dilator, Male; Initial	\$82.36
	Dilation Of Urethral Stricture By Passage Of Sound Or Urethral Dilator, Male; Subsequent	\$58.23
53605	Dilation Of Narrowing Of Bladder Canal (Urethra) Under General Or Spinal Anesthesia, Male	\$57.51
53620	Dilation Of Urethral Stricture By Passage Of Filiform And Follower, Male; Initial	\$164.48
53621	Dilation Of Urethral Stricture By Passage Of Filiform And Follower, Male; Subsequent	\$145.23
53660	Dilation Of Bladder Canal (Urethra), Female, Initial	\$66.99
53661	Dilation Of Bladder Canal (Urethra), Female, Subsequent	\$69.70
53665	Dilation Of Bladder Canal (Urethra) Under General Or Spinal Anesthesia, Female	\$34.49
53850	Destruction Of Prostate Tissue Through Bladder Canal (Urethra); By Microwave	\$1,411.64
	Destruction Of Prostate Tissue Through Bladder Canal (Urethra); By Radiofrequency	\$1,375.15
	Destruction Of Prostate Tissue Accessed Through Urethra Using Radiofrequency Generated Water Vapor Heat Therapy	\$1,856.79
	Insertion Of A Temporary Bladder Canal (Urethra) Stent, Male, Using An Endoscope	\$659.93
	Transurethral Radiofrequency Micro-Remodeling Of The Female Bladder Neck And Proximal Urethra For Stress Urinary Incontinence	\$2,416.94
	Unlisted Procedure, Urinary System	Price By Report
	Slitting Of Prepuce, Dorsal Or Lateral, (Separate Procedure); Newborn	\$154.34
	Slitting Of Prepuce, Dorsal Or Lateral, (Separate Procedure); Except Newborn	\$186.63
	Incision And Drainage Of Penis, Deep	\$278.04
	Chemical Destruction Of Growths Of Penis	\$98.61
	Destruction Of Condylomata, Penis, Multiple; Electrodesiccation	\$128.57
	Destruction Of Lesion(S), Penis (Eg, Condyloma, Papilloma, Molluscum Contagiosum, Herpetic Vesicle), Simple; Cryosurgery	\$99.09
	Destruction Of Lesion(S), Penis (Eg, Condyloma, Papilloma, Molluscum Contagiosum, Herpetic Vesicle), Simple; Laser Surgery	\$133.71
	Destruction Of Condylomata, Penis, Multiple; Surgical Excision	
54060	Destruction Of Condylomata, Penis, Multiple; Surgical Excision Destruction Of Lesion(S), Penis (Eg, Condyloma, Papilloma, Molluscum Contagiosum, Herpetic Vesicle), Extensive (Eg, Laser Surgery,	\$184.88
E400F		0004.00
	Electrosurgery, Cryosurgery, Chemosurgery) Bioney Of Penis As A Sengrate Procedure	\$201.33
	Biopsy Of Penis As A Separate Procedure	\$192.60
	Biopsy Of The Deep Structures Of The Penis	\$258.10
	Excision Of Penile Plaque (Peyronie Disease)	\$572.89
	Excision Of Penile Plaque (Peyronie Disease); With Graft To 5 Cm In Length	\$727.63
	Excision Of Penile Plaque (Peyronie Disease); With Graft Greater Than 5 Cm In Length	\$852.81
	Removal Foreign Body From Deep Penile Tissue (Eg, Plastic Implant)	\$421.60
	Amputation Of Penis; Partial	\$577.58
	Amputation Of Penis; Complete	\$746.77
54130	Amputation Of Penis, Radical; With Bilateral Inguinofemoral Lymphadenectomy	\$1,084.07
	Amputation Of Penis, Radical; In Continuity With Bilateral Pelvic Lymphadenectomy, Including External Iliac, Hypogastric And Obturator Nodes	\$1,369.46
54150	Circumcision, Using Clamp / Other	\$154.68

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Plasto Operation of Pens For Straightening Of Chordree (Eg. Hypospadas), With Of Vithinout Mobilization of Unterhite Floration of Characteristics of Control of Chronic Control of Chronic Characteristics (Chronic Characteristics) Floration (Chronic Characteristics) Floration (Chronic Chronic	54235	Injection Of Corpora Cavernosa With Pharmacologic Agent(S) (Eg, Papaverine, Phentolamine, Etc)	\$78.44
Paisic Operation On Penes For Correction Of Chordree OF For First Stage Phopospadies Repair With Or Without Transplantation Of Prepuse 54308 Repair Of Urmary Outet of Penes At Underside Of Penis, Stage 2 Less Than 3 Cm. \$7545 States 1 Command Character States 1 C	54240	Penile Plethysmography	\$97.86
5930 Repair Of Univary Outlet Of Penis At Underside Of Penis, Stage 2 Less Than 3 Cm 5955 59312 Repair Of Univary Outlet Of Penis At Underside Of Penis, Stage 2 Creater Than 3 Cm Viertropolisty For Second Stepp (hospeadiss Repair Or Clording) Viertropolisty For Second Stepp (hospeadiss Repair Or Repairs) 5945 594510 Viertropolisty For Third Stage Hypospadiss Repair (To Relaxes) Proposition (For Third Stage Ceol Repair) 594510 Viertropolisty For Third Stage Hypospadiss Repair (With Or Without Chordee Or Circumosion), With Urethroplasty By Local Skin Flaps (Fig. Flip-Flap, Stage Penis Peni	54300	Plastic Operation Of Penis For Straightening Of Chordee (Eg, Hypospadias), With Or Without Mobilization Of Urethra;	\$638.41
54312 Repair Of Unitrary Outet of Preins At Underside Of Preins, Stage 2 Less Than 3 Cm 54312 Repair Of Unitrary Outet of Preins At Underside Of Preins, Stage 2 Center Than 3 Cm 5474 Unterhoplasty For Second Stage Hypospadias Repair (Including Unitrary Diversion) With Free Skin Graft Obtained From Site Other Than 5474 (Seintable) 54312 Unterhoplasty For Second Stage Hypospadias Repair (Including Unitrary Diversion) With Free Skin Graft Obtained From Site Other Than 54013 (Unterhoplasty) For Third Stage (Hypospadias Repair (Including Unitrary Diversion) With Free Skin Graft Debtaired From Site Other Than 54013 (Unterhoplasty) For Third Stage (Propospadias Repair (Including Unitrary Outer At Underside Of Repair) 54024 Preputed Play) 64024 Preputed Play) 64025 Debtaired Hypospadias Repair (With O' Without Chordee Of Circumcisson); With Urethooplasty By Local Skin Flaps (Eg. Flip-Flag), 64032 Proputed Play) 64032 Repair O' Univery Outer At Underside Of Head O' Penis With Local Skin Flaps, Skin Graft Patch, And O' Island Play 64032 Repair O' Univery Outer At Underside O' Head O' Penis With Local Skin Flaps, Skin Graft Patch, And O' Island Play 64032 Repair O' Univery Outer At Underside O' Head O' Penis With Local Skin Flaps, Skin Graft Patch, And O' Island Play 64032 Prosonal Repair O' Univery Outer At Underside O' Head O' Penis With Local Skin Flaps, Skin Graft Play 64032 Prosonal Repair O' Univery Outer At Universide O' Head O' Penis With Local Skin Flaps, Skin Graft Debtair And Skin Flaps 64032 Prosonal Repair O' Univery Outer O' Penis Complication O' Skin Graft O' Flap 64033 Prosonal Charles O' Univers Outer O' Penis With Skin Graft O' Flap, Stantave 64034 Repair O' Univery Outer O' Penis With Skin Graft O' Flap, Stantave 6403 Plastic Operation O' Penis With Skin Graft O' Flap, Stantave 6403 Plastic Operation O' Penis With Skin Graft O' Flap, Stantave 6404 Plastic O' Univery Outer O' Penis With Skin Graft O' Flap, Stantave 6404 Plastic O' Univery Outer O' Penis With Skin Graft O' Flap, Stantave 6404 Plastic O' U		Plastic Operation On Penis For Correction Of Chordee Or For First Stage Hypospadias Repair With Or Without Transplantation Of Prepuce	
Seption Common Counted Of Penis & Hunderside Of Penis & Stage 2 Greater Than 3 Cm Unterhypotaty For Second Stage Physopeadias Repair (Including Uniterry) Oversion / With Free Skin Graft Obtained From Ste Other Than Seption Control Counter Seption Counter Counter Seption S			\$758.05
Untertroplasty For Second Stage Hypospadias Repair (Including Urinary Diversion) With Free Skin Grill Obtained From Ste Other Than 63136 Gentiles (Vertiroplasty For Third Stage Hypospadias Repair To Reliase Penis From Scrotum (Eg., Third Stage Cecil Repair) 54322 Repair Of Urinary Quilet A Underside Of Penis Simple, Relocation, Stage 1 64322 Repair Of Urinary Outed A Underside Of Penis Simple, Relocation, Stage 1 64328 Proteinal Repair Of Urinary Outed A Underside Of Penis With Load Skin Flage Stage Stage Stage Of Penis Simple Stage Stag			\$653.75
Season	54312		\$746.06
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Sasta Paper of Urinary Outlet At Undersated Of Penels Simple, Relocation, Stage 1 Sasta Paper Speak Repair (With Ort Without Chorder of Circumcision); With Urethropisety By Local Skin Flaps (Eg. Flip-Flap, 54324 Preputati Flap) Sasta Preputati Flap Sasta Preputati Flap Sasta Preputation Preputation Sasta Preputation Preputation Sasta Preputation Preputation Sasta Preputation Preputatio			\$904.98
One Stage Distal Phypospadias Repair (With Or Without Chordee Or Circumcision); With Urethroplasty By Local Skin Flaps (Ep. Flip-Flap, \$978- 54328 (Playards) (Playar			\$649.81
Section Propulation Prop	54322		\$831.03
on Stage Distal Phycospadias Repair (With Or Without, Chrodee Or Circumsionn); With Urethropiasty By Local Skin Flaps And Mobilization Of 54328 (Ploratin Repair Of Urinary) Outlet At Underside Of Head of Penis With Local Skin Flaps, Skin Graft Patch, And/Or Island Flap \$855. 54328 (Proximal Repair Of Urinary) Outlet Detween Thights In Male, With Skin Graft Tube And/Or Island Flap \$815. 54339 (Proximal Repair Of Urinary) Outlet Otherwen Thights In Male, With Skin Graft Tube And/Or Island Flap \$1.00. 54340 (Repair Of Urinary) Outlet Othersed Of Penis, Simple With Stuppical Revision \$825. 54340 (Repair Of Urinary) Outlet Of Penis With Skin Graft Or Flap, Secondary Revision Of Pinis Penis With Skin Graft Or Flap, Secondary Revision Of Pinis Penis With Skin Graft Or Flap, Secondary Revision Of Pinis Penis With Skin Graft Or Flap, Secondary Revision Of Pinis Penis With Skin Graft Or Flap, Secondary Revision Of Pinis Penis With Skin Graft Or Flap, Secondary Revision Of Pinis Penis With Skin Graft Or Flap, Secondary Revision Of Pinis Penis Without Incontinence \$722. 54306 (Plastic Operation On Penis Pro Correct Angulation \$7336) 54306 (Plastic Operation On Penis Pro Correct Angulation \$7336) 54306 (Plastic Operation On Penis Pro Correct Angulation \$7336) 54306 (Plastic Operation On Penis Pro Epopadias Obstal To External Sphincter; With Exstrophy Of Bladder \$11,225. 54400 (Insertion Of Penis Prostinesis Inflatable (Self Contained) \$460 (E 422.4		¢079.07
64328 (Pepair Of Urinary Outlet At Underside Of Head Of Penis With Local Skin Flaps, Skin Graft Patch, And/Or Island Flap \$85. 64328 (Pepair Of Urinary Outlet At Underside Of Base of Penis With Skin Graft Tube And/Or Island Flap \$91. 64336 (Proximal Repair Of Urinary Outlet At Underside Of Base of Penis With Skin Graft Tube And/Or Island Flap \$1.08 64340 (Repair Of Urinary Outlet Of Penis Complication With Mobilization of Skin Graft for Flap \$25. 64341 (Repair Of Urinary Outlet Of Penis With Skin Graft Or Flap, Extensive \$91. 64342 (Repair Of Urinary Outlet Of Penis With Skin Graft Or Flap, Extensive \$91. 64302 (Repair Of Urinary Outlet Of Penis With Skin Graft Or Flap, Extensive \$91. 64300 (Plastic Operation On Penis To Correct Angulation \$73. 64300 (Plastic Operation On Penis To Correct Angulation \$73. 64300 (Plastic Operation On Penis To Correct Angulation \$72. 64400 (Insention Of Penis Penis With Skin Graft Or Flap, Extensive With Skin Graft Penis With Introduction of Penis Penis With Introduction Penis With Introduction of Penis Penis With Introduction Penis With Introduction of Penis With Introduction of Penis With Introduction of Penis Wi	54324	1 17	ф970.97
54322 Proximal Repair Of Urinary Outlet At Undersice Of Beao of Pens With Loral Skin Graft Patch, And/Or Island Flap S915 54332 Proximal Repair Of Urinary Outlet Between Thighs in Male, With Skin Graft Tube And/Or Island Flap S116 54340 Repair Of Urinary Outlet At Undersice Of Pens, Simple With Skin Graft Tube And/Or Island Flap S16 54340 Repair Of Urinary Outlet Of Pens With Skin Graft Or Flap S65 54344 Repair Of Urinary Outlet Of Pens With Skin Graft Or Flap S65 54348 Repair Of Urinary Outlet Of Pens With Skin Graft Or Flap S65 54348 Repair Of Urinary Outlet Of Pens With Skin Graft Or Flap S66 54350 Plastic Operation On Penis To Correct Angulation S73 54360 Plastic Operation On Penis To Correct Angulation S73 54360 Plastic Operation On Penis To Correct Angulation S73 54360 Plastic Operation On Penis To Correct Angulation S73 54360 Plastic Operation On Penis Publish Internation S74 54400 Insertion Of Penis Prosthesis Non-Inflatable (Gell Contained) S60 54400 Insertion Of Penis Prosthesis Inflatable (S61 Contained) S60 54400 Repair Of Internation of Internation S74 Audit-Component, Inflatable Penis Prosthesis Without Replacement Of Prosthesis S66 54400 Repair Of Internation S74 Audit-Component, Inflatable Penis Prosthesis At The Same Operative Session 54410 Penstravia And Replacement Of All Components Of All Wit-Component, Inflatable Penis Prosthesis S72 54410 Penstravia And Replacement of Non-Inflatable S68-Contained Penis Prosthesis S72 54410 Penstravia S68-Contained S68-Contained Penis Prosthesis S72 54410 Penstravia S68-Contained S68-Contained Penis Prost	54326		\$953.01
1.5432 Proximal Repair Of Urinary Outlet Between Trippis In Male, Whis Rior Graft Tube AnaCir Island Flap			\$852.48
E4336 Pezer Urlinary Outet Between Thighs in Male. With Skin Graft Tube And/Or Island Flap \$1,086 54340 Repair Of Urinary Outet At Underside Of Pens. Simple With Surgical Revision \$252 54340 Repair Of Urinary Outet Of Pens Complication With Mobilization Of Skin Graft Or Flap \$855 54348 Repair Of Urinary Outet Of Pens With Skin Graft Or Flap. Secondary Revision Of Pens Surgical Revision Of Pens With Skin Graft Or Flap. Secondary Revision Of Pens Surgical Pension \$1,285 54348 Repair Of Urinary Outet Of Pens With Skin Graft Or Flap. Secondary Revision Of Pens Surgical Pension \$1,285 54350 Palsic Depetation On Pension To Correct Angulation \$1,235 54360 Palsic Depetation On Pension To Correct Angulation \$1,235 54350 Palsic Depetation On Pension Pe			\$919.16
Sadd Repair Of Urinary Outlet of Under National Office State Sadd Repair Of Urinary Outlet of Penis Complication Off Nation Graft OF Flap Sadd Repair Of Urinary Outlet of Penis Complication Off Nation Graft OF Flap Sadd Repair Of Urinary Outlet of Penis With Skin Graft OF Flap, Extensive Sadd Repair Of Urinary Outlet Off Penis With Skin Graft OF Flap, Extensive Sadd Repair Of Urinary Outlet Off Penis With Skin Graft OF Flap, Extensive Sadd Repair Office		· · · ·	\$1,080.23
September Sept			\$521.37
S493 Repair Of Urinary Quillet Of Penis Will Skin Graft Or Flap, Secondary Revision Of Prior Surgery \$1,255 54360 Plastic Operation On Penis To Correct Angulation \$173 54380 Plastic Repair Of Urinary Quillet Of Penis Will Skin Graft Or Flap, Secondary Revision Of Prior Surgery \$1,255 54360 Plastic Repair Of Urinary Quillet Of Penis Will Michael Internation \$173 54380 Plastic Repair Of Urinary Quillet Of Penis Without Incontinence \$174 54380 Plastic Repair Of Urinary Quillet Of Penis Without Incontinence \$184 54390 Plastic Operation On Penis Prosthesis Not-Inflatable (Semi-Rigid) \$1,22 54400 Insertion Of Penile Prosthesis Inflatable (Semi-Rigid) \$1,22 54401 Insertion Of Penile Prosthesis Inflatable (Semi-Rigid) \$1,22 54401 Insertion Of Penile Prosthesis Inflatable (Semi-Rigid) \$1,22 54406 Repair Of Components Of A Multi-Component, Inflatable Penile Prosthesis At The Same Operative Session \$728 54410 Removal And Replacement Of All Components Of A Multi-Component, Inflatable Penile Prosthesis At The Same Operative Session \$728 54410 Removal And Replacement Of All Components Of A Multi-Component, Inflatable Penile Prosthesis Through An Infected Field At The Same Session \$1,441 Operative Session		1 , 1 0	\$859.91
54328 Repair Of Urinary Outlet Of Penis With Skin Graft Or Flap, Secondary Revision Of Prior Surgery \$1,285 54360 Plastic Departation On Penis To Correct Angulation \$737 54380 Plastic Repair Of Urinary Outlet Of Penis Without Incontinence \$726 54325 Plastic Repair Of Urinary Outlet Of Penis With Incontinence \$726 54326 Plastic Repair Of Urinary Outlet Of Penis With Incontinence \$726 54326 Plastic Operation On Penis For Epispadias Distal To Esternal Sphinctor, With Exstrophy Of Bladder \$1,126 54400 Insertion Of Penis Prosthessis Inflastable (Semi-Rigid) \$467 54401 Removal Of All Components Of A Multi-Component, Inflatable Penis Prosthesis \$667 54408 Repair Of Component(S) Of A Multi-Component, Inflatable Penis Prosthesis \$667 54408 Repair Of Components (S) Of A Multi-Component Inflatable Penis Prosthesis \$667 54408 Repair Of Components (S) Of A Multi-Component Inflatable Penis Prosthesis \$668 54410 Semi-Rigid Of Inflatable (Semi-Rigid) Of Inflatable (Semi-Rigid Of Penis Prosthesis \$669 54411 Same Office of Penis Prosthesis \$669 54416 Removal And Replacement Of Non-Inflatable (Semi-Rigid) Of Inflatable (Semi-Contained) Penile Prosthesis A The Same Operative Session \$655 54416 Removal And Replacement Of Non-Inflatable (Semi-Rigid) Of Inflatable (Semi-Contained) Penile Prosthesis A The Same Operative Session \$655 54417 Same Operative Session, Including Imgalon And Debridement Of Infocted Tissue \$641 54418 Same Operative Session, Including Imgalon And Debridement Of Infocted Tissue \$641 54419 Same Operative Session, Including Imgalon And Penis Prosthesis (Semi-Rigid) Of Inflatable (Semi-Rigi			\$919.16
S436 Plastic Operation On Penis To Correct Angulation \$737			\$1,283.67
S438 Plastic Repair Of Urinary Quited (OP Penis With Incontinence \$344	54360	Plastic Operation On Penis To Correct Angulation	\$731.00
S430 Plastic Operation On Penis For Epispadias Distal To External Sphinicer, With Exstrophy Of Bladder \$4.128	54380	Plastic Repair Of Urinary Outlet Of Penis Without Incontinence	\$729.04
S440 Insertion Of Penile Prosthesis Non-Inflatable (Semi-Rigid) S460 Insertion Of Penile Prosthesis Inflatable (Seff Contained) S605 S4408 Repair Of Components Of A Multi-Component, Inflatable Penile Prosthesis Without Replacement Of Prosthesis S605 S4408 Repair Of Component(S) Of A Multi-Component, Inflatable Penile Prosthesis S605 S4408 Repair Of Component(S) Of A Multi-Component, Inflatable Penile Prosthesis At The Same Operative Session, Including Imgation And Debridment Of Inflatable Penile Prosthesis Through An Inflatable Session S721 Removal And Replacement Of All Components Of A Multi-Component Inflatable Penile Prosthesis Through An Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis At The Same Operative Session Removal Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis At The Same Operative Session Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis At The Same Operative Session Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable At The Same Operative Session, Including Irrigation And Debridement Of Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable At The Same Operative Session, Including Irrigation And Debridement Of Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable At The Same Operative Session, Including Irrigation And Debridement Of Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable At The Same Operative Session, Including Irrigation And Debridement Of Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable And Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable (Self-Contained) Penile Prosthes	54385	Plastic Repair Of Urinary Outlet Of Penis With Incontinence	\$848.55
Section Insertion Of Penile Prosthesis Inflatable (Self Contained) \$605	54390	Plastic Operation On Penis For Epispadias Distal To External Sphincter; With Exstrophy Of Bladder	\$1,128.27
Sede Removal Of All Components Of A Multi-Component, Inflatable Penile Prosthesis Without Replacement Of Prosthesis \$667	54400	Insertion Of Penile Prosthesis Non-Inflatable (Semi-Rigid)	\$487.21
S4410 Removal And Replacement Of All Component(S) Of A Multi-Component, Inflatable Penile Prosthesis At The Same Operative Session Removal And Replacement Of All Components Of A Multi-Component Inflatable Penile Prosthesis Through An Infected Field At The Same S4411 Operative Session, Including Irrigation And Debridement Of Infected Tissue S4415 Removal Of Non-Inflatable (Semi-Rigid) Or Inflatable (Seli-Contained) Penile Prosthesis, Without Replacement Of Prosthesis S4416 Removal And Replacement Of Non-Inflatable (Seli-Contained) Penile Prosthesis, Without Replacement Of Prosthesis S4416 Removal And Replacement Of Non-Inflatable (Seli-Contained) Penile Prosthesis, Without Replacement Of Replacement Of Non-Inflatable (Seli-Contained) Penile Prosthesis At The Same Operative Session Removal And Replacement Of Non-Inflatable (Seli-Contained) Penile Prosthesis At The Same Operative Session, Including Irrigation And Debridement Of Inflatable (Seli-Contained) Penile Prosthesis Through An Infected Field At The S4417 Same Operative Session, Including Irrigation And Debridement Of Inflatable (Seli-Contained) Penile Prosthesis Through An Infected Field At The S4417 Same Operative Session, Including Irrigation And Debridement Of Inflatable (Seli-Contained) Penile Prosthesis Through An Infected Field At The S4417 Same Operative Session, Including Irrigation And Debridement Of Inflatable (Seli-Contained) Penile Prosthesis Through An Infected Field At The S4417 Same Operative Session, Including Irrigation And Debridement Of Inflatable (Seli-Contained) Penile Prosthesis Through An Infected Field At The S4417 Same Operative Session, Including Irrigation And Debridement Of Inflatable (Seli-Contained) Penile Prosthesis Through An Infected Field At The S4417 Same Operative Session, Including Irrigation And Debridement Of Infected Tissue S4417 Same Operation Of Infected Tissue S4417 Same Operative Session, Including Irrigation And Debridement Of Infected Tissue S4417 Same	54401	Insertion Of Penile Prosthesis Inflatable (Self Contained)	\$609.05
Setton Removal And Replacement Of All Component(S) Of A Multi-Component, Inflatable Penile Prosthesis At The Same Operative Session (an Including Irrigation And Debridement Of Infected Tissue \$937. Setton Including Irrigation And Debridement Of Infected Tissue \$937. Setton And Penicement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis, Without Replacement Of Prosthesis \$486. Setton And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis At The Same Operative Session (Annual Penile Prosthesis Annual Penile Prosthesis At The Same Operation O	54406	Removal Of All Components Of A Multi-Component, Inflatable Penile Prosthesis Without Replacement Of Prosthesis	\$667.29
Removal And Replacement Of All Components Of A Multi-Component Inditable Penile Prosthesis Through An Infected Field At The Same 54411 Operative Session, Including Irrigation And Debridement Of Infected Tissue 54418 Removal Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis, Without Replacement Of Prosthesis 54418 Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis At The Same Operative Session Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis At The Same Operative Session Including Irrigation And Debridement Of Inflected Tissue 54417 Same Operative Session, Including Irrigation And Debridement Of Inflected Tissue 54420 Corpora Cavernosa-Saphenous Vein Shunt (Priapism Operation), Unilateral Or Bilateral 54430 Corpora Cavernosa-Saphenous Vein Shunt (Priapism Operation), Unilateral Or Bilateral 54430 Corpora Cavernosa-Corpus Spongiosum Shunt Or Corpora Cavernosa-Gians Penis Shunt (Priapism Operation), Unilateral Or Bilateral 54437 Repair Of Penis 54437 Repair Of Penis 54437 Repair Of Penis Penis Frishilization (Eg. Biopsy Needle, Winter Procedure, Rongeur, Or Punch) (Priapism Operation) 5373 54437 Repair Of Penis For Injury 54437 Repair Of Penis For Injury 54438 Replantation Of Amputated Penis 5450 Biopsy Of Testis, Needle (Separate Procedure) 5450 Biopsy Of Testis, Needle (Separate Procedure) 5450 Biopsy Of Testis, Needle (Separate Procedure) 5450 Removal Of One Testis (Testicle) For Tumor, Groin Approach 54512 Excision Of Extraparenchymal Lesion Of Testis 5450 Removal Of One Testis (Testicle) For Tumor, Abdominal Approach 55450 Exploration For Undescended Testis (Inguinal Or Scrotal Area) 5450 Exploration For Undescended Testis (Inguinal Or Scrotal Area) 5450 Exploration For Undescended Testis (Inguinal Or Scrotal Area) 5450 Diopsy Of Testicle Or Tumor, Or Without Fixation Of Contralateral Testis 5460 Removal Of Or Testicle Infury 5460 Diopsy Of Testicle Or Tumor, Contralateral	54408	Repair Of Component(S) Of A Multi-Component, Inflatable Penile Prosthesis	\$721.62
Removal And Replacement Of All Components Of A Multi-Component Inditable Penile Prosthesis Through An Infected Field At The Same 54411 Operative Session, Including Irrigation And Debridement Of Infected Tissue 54418 Removal Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis, Without Replacement Of Prosthesis 54418 Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis At The Same Operative Session Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis At The Same Operative Session Including Irrigation And Debridement Of Inflected Tissue 54417 Same Operative Session, Including Irrigation And Debridement Of Inflected Tissue 54420 Corpora Cavernosa-Saphenous Vein Shunt (Priapism Operation), Unilateral Or Bilateral 54430 Corpora Cavernosa-Saphenous Vein Shunt (Priapism Operation), Unilateral Or Bilateral 54430 Corpora Cavernosa-Corpus Spongiosum Shunt Or Corpora Cavernosa-Gians Penis Shunt (Priapism Operation), Unilateral Or Bilateral 54437 Repair Of Penis 54437 Repair Of Penis 54437 Repair Of Penis Penis Frishilization (Eg. Biopsy Needle, Winter Procedure, Rongeur, Or Punch) (Priapism Operation) 5373 54437 Repair Of Penis For Injury 54437 Repair Of Penis For Injury 54438 Replantation Of Amputated Penis 5450 Biopsy Of Testis, Needle (Separate Procedure) 5450 Biopsy Of Testis, Needle (Separate Procedure) 5450 Biopsy Of Testis, Needle (Separate Procedure) 5450 Removal Of One Testis (Testicle) For Tumor, Groin Approach 54512 Excision Of Extraparenchymal Lesion Of Testis 5450 Removal Of One Testis (Testicle) For Tumor, Abdominal Approach 55450 Exploration For Undescended Testis (Inguinal Or Scrotal Area) 5450 Exploration For Undescended Testis (Inguinal Or Scrotal Area) 5450 Exploration For Undescended Testis (Inguinal Or Scrotal Area) 5450 Diopsy Of Testicle Or Tumor, Or Without Fixation Of Contralateral Testis 5460 Removal Of Or Testicle Infury 5460 Diopsy Of Testicle Or Tumor, Contralateral	54410	Removal And Replacement Of All Component(S) Of A Multi-Component, Inflatable Penile Prosthesis At The Same Operative Session	\$787.43
S4415 Removal Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis, Without Replacement Of Prosthesis \$486			
September Sept	54411	Operative Session, Including Irrigation And Debridement Of Infected Tissue	\$937.68
Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis Through An Infected Field At The 54417 Same Operative Session, Including Irrigation And Debridement Of Infected Tissue 54420 Corpora Cavernosa-Saphenous Vein Shunt (Priapism Operation), Unilateral Or Bilateral 54430 Corpora Cavernosa-Corpus Spongiosum Shunt Or Corpora Cavernosa-Glans Penis Shunt (Priapism Operation), Unilateral Or Bilateral 5584 54435 Corpora Cavernosa-Glans Penis Fistulization (Eg. Biopsy Needle, Winter Procedure, Rongeur, Or Punch) (Priapism Operation) 5573 Repair Of Penis 557437 Repair Of Penis 557437 Repair Of Penis 5574450 Pissuit Operation Of Penis For Injury 557450 Biopsy Of Testis, Incisional Including Lysis Of Preputial Adhesions And Stretching 5675 Biopsy Of Testis, Incisional (Separate Procedure) 5676 Biopsy Of Testis, Incisional (Separate Procedure) 5676 Biopsy Of Testis, Incisional (Separate Procedure) 5676 Removal Of Testicic 5676 Removal Of Testicic 5676 Removal Of One Testis (Testicle) For Tumor, Groin Approach 5677 Removal Of One Testis (Testicle) For Tumor, Abdominal Approach 5677 Bespiration For Undescended Testis With Abdominal Exploration 5677 Repair Of Testice 5677 Repair Of Testice Surgical, With Or Without Fixation Of Contralateral Testis 5678 Removal Of Testis, Surgical, With Or Without Fixation Of Contralateral Testis 5677 Repair Of Testical Procedure) 5772 Repair Of Testical Procedure Repositioning And Fixation Of Misplaced Testis With Abdominal Exploration 5772 Repair Of Testical Procedure, For Intra-Abdominal Testis (Eg. Fowler-Stephens) 5772 Repair Of Testical Procedure, Testis Price By Reposition And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area 5776 Reposition And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area 5776 Reposition And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area	54415	Removal Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis, Without Replacement Of Prosthesis	\$486.87
Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis Through An Infected Field At The 54417 Same Operative Session, Including Irrigation And Debridement Of Infected Tissue 54420 Corpora Cavernosa-Saphenous Vein Shunt (Priapism Operation), Unilateral Or Bilateral 54430 Corpora Cavernosa-Corpus Spongiosum Shunt Or Corpora Cavernosa-Glans Penis Shunt (Priapism Operation), Unilateral Or Bilateral 5584 54435 Corpora Cavernosa-Glans Penis Fistulization (Eg. Biopsy Needle, Winter Procedure, Rongeur, Or Punch) (Priapism Operation) 5573 Repair Of Penis 557437 Repair Of Penis 557437 Repair Of Penis 5574450 Pissuit Operation Of Penis For Injury 557450 Biopsy Of Testis, Incisional Including Lysis Of Preputial Adhesions And Stretching 5675 Biopsy Of Testis, Incisional (Separate Procedure) 5676 Biopsy Of Testis, Incisional (Separate Procedure) 5676 Biopsy Of Testis, Incisional (Separate Procedure) 5676 Removal Of Testicic 5676 Removal Of Testicic 5676 Removal Of One Testis (Testicle) For Tumor, Groin Approach 5677 Removal Of One Testis (Testicle) For Tumor, Abdominal Approach 5677 Bespiration For Undescended Testis With Abdominal Exploration 5677 Repair Of Testice 5677 Repair Of Testice Surgical, With Or Without Fixation Of Contralateral Testis 5678 Removal Of Testis, Surgical, With Or Without Fixation Of Contralateral Testis 5677 Repair Of Testical Procedure) 5772 Repair Of Testical Procedure Repositioning And Fixation Of Misplaced Testis With Abdominal Exploration 5772 Repair Of Testical Procedure, For Intra-Abdominal Testis (Eg. Fowler-Stephens) 5772 Repair Of Testical Procedure, Testis Price By Reposition And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area 5776 Reposition And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area 5776 Reposition And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area			
54417 Same Operative Session, Including Irrigation And Debridement Of Infected Tissue \$815 54420 Corpora Cavernosa-Saphenous Vein Shunt (Priapism Operation), Unilateral Or Bilateral \$641 54430 Corpora Cavernosa-Corpus Spongiosum Shunt Or Corpora Cavernosa-Glans Penis Shunt (Priapism Operation), Unilateral Or Bilateral \$584 54435 Corpora Cavernosa-Glans Penis Fistulization (Eg, Biopsy Needle, Winter Procedure, Rongeur, Or Punch) (Priapism Operation) \$375 54437 Repair Of Penis \$615 54438 Replantation Of Amputated Penis \$151 54430 Plastic Operation Of Penis For Injury \$373 54430 Plastic Operation Of Penis For Injury \$373 54450 Foreskin Manipulation Including Lysis Of Preputial Adhesions And Stretching \$66 54500 Biopsy Of Testis, Needle (Separate Procedure) \$67 54505 Biopsy Of Testis, Incisional (Separate Procedure) \$67 54512 Excision Of Extraparenchymal Lesion Of Testis \$490 54522 Orchiectomy, Partial \$533 54523 Removal Of One Testis (Testicle) For Tumor, Groin Approach \$517 54535 Removal Of One Testis (Testicle) For Tumor, Abdominal Approach \$676 54505 Exploration For Undescended Testis With Abdominal Exploration \$627 54500 Reduction Of Torsisin Of Testis, Surgical, With Or Without Fixation Of Contralateral Testis	54416		\$655.37
Setable Corpora Cavernosa-Saphenous Vein Shunt (Priapism Operation), Unilateral Or Bilateral Setable		· · · · · · · · · · · · · · · · · · ·	
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Prostatectomy, Perineal Radical; With Lymph Node Biopsy(S) \$1.657.			
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Prostatectomy, Including Control Of Postoperative Bleeding During Initial Hospitalization, Complete (Vasectomy, Meatotomy, Urethral 58221 Calibration And/Or Dilation, And Internal Urethrotomy Are Included); Suprapubic, Subtotal. One Or Postoperative Bleeding During Initial Hospitalization, Complete (Vasectomy, Meatotomy, Urethral 58381 Calibration And/Or Dilation, And Internal Urethrotomy Are Included); Retropubic, Subtotal 5840 Prostatectomy, Retropubic Radical, With Lymph Node Biopsy(S) \$1,061.1 Space 2012 Prostatectomy, Retropubic Radical, With Lymph Node Biopsy(S) \$1,062.1 Space 2012 Prostatectomy, Retropubic Radical, With Dilation Provided Prostate Complete (Vasectomy, Meatotomy) \$1,061.1 Space 2012 Prostatectomy, Retropubic Radical, With Dilational Provided Prostate Complete (Vasectomy, Meatotomy) \$1,061.1 Space 2012 Prostate Complete (Vasectomy) Retropubic Radical, With Lymph Node Biopsy(S) \$1,062.1 Space 2012 Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) \$995.1 Space 2012 Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) \$995.1 Space 2012 Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) \$995.1 Space 2012 Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) \$995.1 Space 2012 Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) \$995.1 Space 2012 Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy, Including External Iliac, Physophadenectomy, Surgical Palation, Physophadenectomy, Physophadenectomy, Physo	55812	Prostatectomy, Perineal Radical, With Lymph Node Biopsy(S)	\$1,457.74
Spate Calibration And/Or Dilation, And Internal Urethrotomy Are Included): Suprapubic, Subtotal, One Or Two Stages \$794.5	55815	Prostatectomy, Perineal Radical; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, Hypogastric And Obturator Nodes	\$1,595.58
Prostatectomy, Including Control Of Postoperative Bleeding During Initial Hospitalization, Complete (Vasectomy, Meatotomy, Urethral S5831 Calibration And/Of Dilation, And Internal Urethrotomy Are Included); Retropubic, Subtotal \$859. \$5840 Prostatectomy, Retropubic Radical, With Or Without Nerve Sparing; \$1,061.55842 Prostatectomy, Retropubic Radical, With Dilateral Pelvic Lymph Aode Biopsy(S) \$1,062. \$1,062. \$1,062. \$2,064. \$2,064. \$3,062. \$4,064. \$		Prostatectomy, Including Control Of Postoperative Bleeding During Initial Hospitalization, Complete (Vasectomy, Meatotomy, Urethral	
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S5840 Prostatectomy, Retropubic Radical, With Or Without Nerve Sparing; \$1,061.1		Prostatectomy, Including Control Of Postoperative Bleeding During Initial Hospitalization, Complete (Vasectomy, Meatotomy, Urethral	
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Space Prostatectomy, Retropubic Radical; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, Hypogastric And Obturator Nodes \$1,234.		7. 1 0,	\$1,061.81
Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; \$796.5	55842	Prostatectomy, Retropubic Radical; With Lymph Node Biopsy(S)	\$1,062.14
Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; \$796.5	55845	Prostatectomy, Retropubic Radical; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, Hypogastric And Obturator Nodes	\$1,234.14
Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, 55865 Hypogastric And Obturator Nodes \$1,212. 55866 Laparoscopy, Surgical Prostatectomy, Retropubic Radical, Including Nerve Sparing, Includes Robotic Assistance, When Performed \$1,451. 55867 Simple Surgical Subtotal Removal Of Prostate Using Laparoscope \$898.6. 55873 Cryosurgical Ablation Of The Prostate (Includes Ultrasonic Guidance And Monitoring) \$5,786. 55874 Injection Of Biodegradable Material Next To Prostate \$3,222. \$5,786. \$5,786. \$5,786. \$5,786. \$5,786. \$5,786. \$6,786. \$1,100.			\$796.28
Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, \$1,212. \$1,212			*
Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, \$1,212. \$1,212	55862	Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy)	\$995.34
55865 Hypogastric And Obturator Nodes \$1,212. 55866 Laparoscopy, Surgical Prostatectomy, Retropubic Radical, Including Nerve Sparing, Includes Robotic Assistance, When Performed \$1,451. 55867 Simple Surgical Subtotal Removal Of Prostate Using Laparoscope \$896. 55873 Cryosurgical Ablation Of The Prostate (Includes Ultrasonic Guidance And Monitoring) \$5,786. 55874 Injection Of Biodegradable Material Next To Prostate \$3,222. 55875 Transparineal Place Needles/Cath. Prostate \$791.2 Placement Of Interstitial Device(S) For Radiation Therapy Guidance (Eg., Fiducial Markers, Dosimeter), Prostate (Via Needle, Any Approach), Single Or Multiple \$142.6 55880 High-Intensity Ultrasound Destruction Of Cancerous Tissue In Prostate Gland, Accessed Through Rectum Using Ultrasound Guidance \$891. 55890 Unlisted Procedure, Male Genital System Price By Report Placement Of Needles Or Catheters Into Pelvic Organs And/ Or Genitalia (Except Prostate) For Subsequent Interstitial Radioelement \$470.5 56402 Incision And Drainage Of Female Genital Gland Abscess \$140.4 56402 Creation Of Drainage Of Female Genital Gland Abscess \$140.4 56404 Creation Of Drainage Tract For Female Genital Gland Or Cyst \$183.5 56404 Lysis Of Labial Adhesions \$152.4 56405 Destruction Of Lesion(S), Vulva; Extensive (Eg. Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery) \$243.5 56606 Biopsy Of External Female Genitals, Lesion \$98.6 56607 Partial Removal Of External Female Genitals, Partial \$883.5 56630 Partial Removal Of External Female Genitals, Partial \$883.5 56631 Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy \$1,084.5 5007 Standard Prostate (Lymphadenectomy) \$1,084.5 5008 Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy \$1,084.5 5008 Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy \$1,084.5 5009 Vulvectomy, Radic			
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56501Destruction Of Lesion(S), Vulva; Simple (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)\$150.56515Destruction Of Lesion(S), Vulva; Extensive (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)\$243.56605Biopsy Of External Female Genitals, 1 Lesion\$98.56606Biopsy Of External Female Genitals, Each Additional Lesion\$35.56620Partial Removal Of External Female Genitals, Simple\$606.56625Removal Of External Female Genitals. Complete\$617.56630Partial Removal Of External Female Genitals, Partial\$883.56631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.			\$152.51
56515Destruction Of Lesion(S), Vulva; Extensive (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)\$243.356605Biopsy Of External Female Genitals, 1 Lesion\$98.656606Biopsy Of External Female Genitals, Each Additional Lesion\$35.356620Partial Removal Of External Female Genitals, Simple\$606.856625Removal Of External Female Genitals. Complete\$617.256630Partial Removal Of External Female Genitals, Partial\$883.356631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.8			\$42.78
56605Biopsy Of External Female Genitals, 1 Lesion\$98.456606Biopsy Of External Female Genitals, Each Additional Lesion\$35.356620Partial Removal Of External Female Genitals, Simple\$606.856625Removal Of External Female Genitals. Complete\$617.256630Partial Removal Of External Female Genitals, Partial\$883.356631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.5			\$150.17
56606Biopsy Of External Female Genitals, Each Additional Lesion\$35.356620Partial Removal Of External Female Genitals, Simple\$606.856625Removal Of External Female Genitals. Complete\$617.356630Partial Removal Of External Female Genitals, Partial\$883.356631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.3			\$243.72
56620Partial Removal Of External Female Genitals, Simple\$606.856625Removal Of External Female Genitals. Complete\$617.256630Partial Removal Of External Female Genitals, Partial\$883.356631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.3			\$98.43
56625Removal Of External Female Genitals. Complete\$617.356630Partial Removal Of External Female Genitals, Partial\$883.356631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.3			\$35.36
56630Partial Removal Of External Female Genitals, Partial\$883.56631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.			\$606.83
56631 Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy \$1,084.5		, ,	\$617.27
			\$883.72
56632 Vulvectomy, Radical, Partial; With Bilateral Inguinofemoral Lymphadenectomy \$1,318.6			\$1,084.51
	56632	Vulvectomy, Radical, Partial; With Bilateral Inguinofemoral Lymphadenectomy	\$1,318.87

	Description	Foo
	Description Vulvectomy, Radical, Complete;	Fee \$1,126.52
	Vulvectorny, Radical, Complete; Vulvectomy, Radical, Complete; With Unilateral Inguinofemoral Lymphadenectomy	\$1,126.52
	Vulvectorny, Radical, Complete; With Bilateral Inguinofemoral Lymphadenectomy	\$1,384.28
	Vulvectorny, Radical, Complete, With Inguinofemoral, Iliac, And Pelvic Lymphadenectomy Valvectorny, Radical, Complete, With Inguinofemoral, Iliac, And Pelvic Lymphadenectomy	\$1,395.06
	Partial Removal Of Membrane At Uterine Opening, Open Procedure	\$181.66
	Removal Of Female Genital Gland Or Cyst	\$277.34
	Plastic Repair Of Introitus	\$233.01
	Clitoroplasty For Intersex State	\$1,067.46
	Perineoplasty, Repair Of Perineum, Non-Obstetrical (Separate Procedure)	\$282.17
	Colposcopy Of The Vulva;	· · · · · · · · · · · · · · · · · · ·
		\$116.25
	Colposcopy Of The Vulva; With Biopsy (S)	\$155.21
	Colpotomy; With Exploration	\$186.85
	Colpotomy; With Drainage Of Pelvic Abscess	\$423.34
	Colpocentesis (Separate Procedure)	\$119.60
	Incision And Drainage Of Vaginal Hematoma; Obstetrical/Postpartum	\$168.07
	Incision And Drainage Of Vaginal Hematoma; Non-Obstetrical (Eg, Post-Trauma, Spontaneous Bleeding)	\$332.82
	Destruction Of Vaginal Lesion(S); Simple (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)	\$131.06
	Destruction Of Vaginal Lesion(S); Extensive (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)	\$234.99
57100	Biopsy Of Vaginal Mucosa; Simple (Separate Procedure)	\$71.21
57105	Biopsy Of Vaginal Mucosa; Extensive, Requiring Suture (Including Cysts)	\$168.87
57106	Vaginectomy, Partial Removal Of Vaginal Wall;	\$499.91
57107	Vaginectomy, Partial Removal Of Vaginal Wall; With Removal Of Paravaginal Tissue (Radical Vaginectomy)	\$1,332.52
	Vaginectomy, Partial Removal Of Vaginal Wall; With Removal Of Paravaginal Tissue (Radical Vaginectomy) With Bilateral Total Pelvic	*
57109	Lymphadenectomy And Para-Aortic Lymph Node Sampling (Biopsy)	\$1,579.01
	Vaginectomy, Complete Removal Of Vaginal Wall;	\$920.49
	Vaginectomy, Complete Removal Of Vaginal Wali, With Removal Of Paravaginal Tissue (Radical Vaginectomy)	\$1,579.01
	Suture Closure Of The Vagina And Vaginal Opening	\$490.47
	Excision Of Vaginal Septum	\$217.56
	Excision Of Vaginal Cyst Or Tumor	\$222.81
	Irrigation Of Vagina And/Or Application Of Drug To Treat Infection	\$56.62
	Insertion Of Uterine Tandem And/Or Vaginal Ovoids For Clinical Brachytherapy	\$412.26
	Insertion of A Vaginal Radiation Afterloading Apparatus For Clinical Brachytherapy	
		\$237.58
	Fitting And Insertion Of Pessary Or Other Intravaginal Support Device	\$51.36
57170	Diaphragm Or Cervical Cap Fitting With Instructions	\$73.53
57180	Introduction Of Any Hemostatic Agent Or Pack For Spontaneous Or Traumatic Non-Obstetrical Hemorrhage (Separate Procedure)	\$192.52
57200	Colporrhaphy, Suture Of Injury Of Vagina (Nonobstetrical)	\$276.16
57210	Colpoperineorrhaphy, Suture Of Injury Of Vagina And/Or Perineum (Nonobstetrical)	\$348.84
57220	Plastic Operation On Urethral Sphincter, Vaginal Approach (Eg, Kelly Urethral Plication)	\$323.01
	Plastic Repair Of Urethrocele	\$387.99
	Repair Of Herniation Of Bladder Into Vaginal Wall	\$544.56
	Posterior Colporrhaphy, Repair Of Rectocele With Or Without Perineorrhaphy	\$530.49
	Plastic Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder	\$731.41
	Repair Of Herniation Of Rectum And Bladder Into Vaginal Wall	\$821.40
37203	Insertion Of Mesh Or Other Prosthesis For Repair Of Pelvic Floor Defect, Each Site (Anterior, Posterior Compartment), Vaginal Approach (List	Ψ021.40
57267	Separately In Addition To Code For Primary Procedure)	\$226.09
	Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Vagina	\$521.78
	Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Abdominal	
		\$745.84
	Colpopexy, Abdominal Approach	\$884.89
	Colpopexy, Vaginal; Extra-Peritoneal Approach (Sacrospinous, Iliococcygeus)	\$637.63
	Colpopexy, Vaginal; Intra-Peritoneal Approach (Uterosacral, Levator Myorrhaphy)	\$712.50
	Repair Through Abdomen Of Vaginal Wall Defect, Open Procedure	\$764.03
	Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed); Vaginal Approach	\$730.54
	Removal Or Revision Of Sling For Stress Incontinence (Eg, Fascia Or Synthetic)	\$751.42
	Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic)	\$760.07
	Pereyra Procedure, Including Anterior Colporrhaphy	\$731.08
	Construction Of Artificial Vagina; Without Graft	\$506.87
57292	Construction Of Artificial Vagina; With Graft	\$506.87 \$758.86
57292 57295	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach	\$506.87 \$758.86 \$464.04
57292 57295 57296	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure	\$506.87 \$758.86 \$464.04 \$875.79
57292 57295 57296	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach	\$506.87 \$758.86 \$464.04
57292 57295 57296 57300	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure	\$506.87 \$758.86 \$464.04 \$875.79
57292 57295 57296 57300 57305	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure Closure Of Rectovaginal Fistula; Vaginal Approach	\$506.87 \$758.86 \$464.04 \$875.79 \$567.64
57292 57295 57296 57300 57305 57307	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Abnormal Drainage Tract From Abdomen	\$506.87 \$758.86 \$464.04 \$875.79 \$567.64 \$901.43
57292 57295 57296 57300 57305 57307 57308	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Abnormal Drainage Tract From Abdomen Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure	\$506.87 \$758.86 \$464.04 \$875.79 \$567.64 \$901.43 \$1,003.79
57292 57295 57296 57300 57305 57307 57308 57310	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Abnormal Drainage Tract From Abdomen Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication	\$506.87 \$758.86 \$464.04 \$875.79 \$567.64 \$901.43 \$1,003.79 \$612.71
57292 57295 57296 57300 57305 57307 57308 57310 57311	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Abnormal Drainage Tract From Abdomen Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina	\$506.87 \$758.86 \$464.04 \$875.79 \$567.64 \$901.43 \$1,003.79 \$612.71 \$457.92 \$514.89
57292 57295 57296 57300 57305 57307 57308 57310 57311 57320	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Abnormal Drainage Tract From Abdomen Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant	\$506.87 \$758.86 \$464.04 \$875.79 \$567.64 \$901.43 \$1,003.79 \$612.71 \$457.92 \$514.89
57292 57295 57296 57300 57305 57307 57308 57310 57311 57320 57330	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Abnormal Drainage Tract From Abdomen Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant Closure Of Abnormal Drainage Tract From Bladder Into Vagina Closure Of Abnormal Drainage Tract From Bladder Into Vagina	\$506.87 \$758.86 \$464.04 \$875.79 \$567.64 \$901.43 \$1,003.79 \$612.71 \$457.92 \$514.89 \$520.95
57292 57295 57296 57300 57305 57307 57308 57310 57311 57320 57330 57335	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Abnormal Drainage Tract From Abdomen Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant Closure Of Abnormal Drainage Tract From Bladder Into Vagina Closure Of Abnormal Drainage Tract From Bladder Into Vagina Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina Vaginoplasty For Intersex State	\$506.87 \$758.86 \$464.04 \$875.79 \$567.64 \$901.43 \$1,003.79 \$612.71 \$457.92 \$514.89 \$520.95 \$706.53
57292 57295 57296 57300 57305 57307 57308 57310 57311 57320 57330 57335 57400	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Abnormal Drainage Tract From Abdomen Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant Closure Of Abnormal Drainage Tract From Bladder Into Vagina Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina Vaginoplasty For Intersex State Dilation Of Vagina Under Anesthesia	\$506.87 \$758.86 \$464.04 \$875.79 \$567.64 \$901.43 \$1,003.79 \$612.71 \$457.92 \$514.89 \$520.95 \$706.53 \$1,078.15
57292 57295 57296 57300 57305 57307 57308 57310 57311 57320 57330 57335 57400 57410	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Abnormal Drainage Tract From Abdomen Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant Closure Of Abnormal Drainage Tract From Bladder Into Vagina Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina Vaginoplasty For Intersex State Dilation Of Vagina Under Anesthesia Pelvic Examination Under Anesthesia	\$506.87 \$758.86 \$464.04 \$875.79 \$567.64 \$901.43 \$1,003.79 \$612.71 \$457.92 \$514.89 \$520.95 \$706.53 \$1,078.15 \$118.76
57292 57295 57296 57300 57305 57307 57308 57310 57311 57320 57335 57400 57410 57415	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Abnormal Drainage Tract From Abdomen Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant Closure Of Abnormal Drainage Tract From Bladder Into Vagina Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina Vaginoplasty For Intersex State Dilation Of Vagina Under Anesthesia Pelvic Examination Under Anesthesia Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local)	\$506.87 \$758.86 \$464.04 \$875.79 \$567.64 \$901.43 \$1,003.79 \$612.71 \$457.92 \$514.89 \$520.95 \$706.53 \$1,078.15 \$118.76 \$106.60
57292 57295 57296 57300 57305 57307 57308 57310 57311 57320 57335 57400 57410 57415	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Abnormal Drainage Tract From Abdomen Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant Closure Of Abnormal Drainage Tract From Bladder Into Vagina Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina Vaginoplasty For Intersex State Dilation Of Vagina Under Anesthesia Pelvic Examination Under Anesthesia Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local) Colposcopy Of The Entire Vagina, With Cervix If Present	\$506.87 \$758.86 \$464.04 \$875.79 \$567.64 \$901.43 \$1,003.79 \$612.71 \$457.92 \$514.89 \$520.95 \$706.53 \$1,078.15 \$118.76 \$106.60
57292 57295 57296 57300 57305 57307 57308 57310 57311 57320 57330 57335 57400 57415 57420 57420	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Abnormal Drainage Tract From Abdomen Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant Closure Of Abnormal Drainage Tract From Bladder Into Vagina Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina Vaginoplasty For Intersex State Dilation Of Vagina Under Anesthesia Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local) Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix	\$506.87 \$758.86 \$464.04 \$875.79 \$567.64 \$901.43 \$1,003.79 \$612.71 \$457.92 \$514.89 \$520.95 \$706.53 \$1,078.15 \$118.76 \$106.60 \$153.36 \$134.64
57292 57295 57296 57300 57305 57307 57307 57311 57320 57330 57335 57400 57410 57415 57420 57421	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Abnormal Drainage Tract From Abdomen Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant Closure Of Abnormal Drainage Tract From Bladder Into Vagina Closure Of Abnormal Drainage Tract From Bladder Into Vagina Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina Vaginoplasty For Intersex State Dilation Of Vagina Under Anesthesia Pelvic Examination Under Anesthesia Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local) Colposcopy Of The Entire Vagina, With Cervix If Present Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach	\$506.87 \$758.86 \$464.04 \$875.79 \$567.64 \$901.43 \$1,003.79 \$612.71 \$457.92 \$514.89 \$520.95 \$706.53 \$1,078.15 \$118.76 \$106.60 \$134.64 \$186.81 \$849.87
57292 57295 57296 57300 57305 57307 57308 57310 57311 57320 57330 57335 57400 57410 57415 57423 57423	Construction Of Artificial Vagina; With Graft Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Rectovaginal Fistula; Vaginal Approach Closure Of Abnormal Drainage Tract From Abdomen Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant Closure Of Abnormal Drainage Tract From Bladder Into Vagina Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina Vaginoplasty For Intersex State Dilation Of Vagina Under Anesthesia Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local) Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix	\$506.87 \$758.86 \$464.04 \$875.79 \$567.64 \$901.43 \$1,003.79 \$612.71 \$457.92 \$514.89 \$520.95 \$706.53 \$1,078.15 \$118.76 \$106.60 \$153.36

	Description	Fee
57452	Colposcopy Of The Cervix Including Upper/Adjacent Vagina;	\$12
57454	Colposcopy Of The Cervix Including Upper/Adjacent Vagina; With Biopsy(S) Of The Cervix And Endocervical Curettage	\$18
57455	Colposcopy Of The Cervix Including Upper/Adjacent Vagina; With Biopsy(S) Of The Cervix	\$17
57456	Colposcopy Of The Cervix Including Upper/Adjacent Vagina; With Endocervical Curettage	\$15
57460	Biopsy Of Cervix Using An Endoscope With A Loop Electrode	\$33
7461	Colposcopy Of The Cervix Including Upper/Adjacent Vagina; With Loop Electrode Conization Of The Cervix	\$37
	Computer-Aided Mapping Of Cervix During Examination Of Vagina And Cervix Using Endoscope	\$4
	Biopsy Of Cervix, Single Or Multiple, Or Local Excision Of Lesion, With Or Without Fulguration (Separate Procedure)	\$15
	Endocervical Curettage (Not Done As Part Of A Dilation And Curettage)	\$10
	Cautery Of Cervix; Electro Or Thermal	\$15
	Cauterization Of Cervix; Cryocautery, Initial Or Repeat	\$17
	Cauterization Of Cervix, Cryocautery, Initial Of Repeat Cauterization Of Cervix; Laser Ablation	
	,	\$19
	Removal Or Destruction Of Cervix With Knife Or Laser	\$36
	Removal Or Destruction Of Cervix With Electrical Cautery	\$29
57530	Trachelectomy (Cervicectomy), Amputation Of Cervix (Separate Procedure)	\$34
	Radical Trachelectomy, With Bilateral Total Pelvic Lymphadenectomy And Para-Aortic Lymph Node Sampling Biopsy, With Or Without	
	Removal Of Tube(S), With Or Without Removal Of Ovary(S)	\$1,59
	Removal Of Remaining Cervix Through The Abdomen	\$72
57545	Excision Of Cervical Stump, Abdominal Approach; With Pelvic Floor Repair	\$76
57550	Removal Of Remaining Cervix Through The Vagina	\$39
57555	Excision Of Cervical Stump, Vaginal Approach; With Anterior And/Or Posterior Repair	\$56
57556	Excision Of Cervical Stump, Vaginal Approach; With Repair Of Enterocele	\$54
	Dilation/Curettage Cervical Stump	\$14
	Cerclage Of Uterine Cervix, Nonobstetrical	\$33
	Trachelorrhaphy, Plastic Repair Of Uterine Cervix, Vaginal Approach	\$28
	Dilation Of Cervical Canal, Instrumental (Separate Procedure)	\$20 \$5
77 000	Bilation of Cervical Cariat, institutiental (Separate 1 rocedure)	φυ
58100	Endometrial Sampling (Biopsy) With Or Without Endocervical Sampling (Biopsy), Without Cervical Dilation, Any Method (Separate Procedure)	\$10
0110	Endometrial Sampling (Biopsy) Performed In Conjunction With Colposcopy (List Separately In Addition To Code For Primary Procedure)	ψr
		\$5
	Dilation And Curettage, Diagnostic And/Or Therapeutic (Nonobstetrical)	\$31
	Abdominal Removal Of Fibroid Tumors (250 Grams Or Less) Of Uterus	\$85
58145	Vaginal Removal Of Fibroid Tumors (250 Grams Or Less) Of Uterus	\$52
58146	Myomectomy, Excision Of Fibroid Tumor(S) Of Uterus, 5 Or More Intramural Myomas And/Or Intramural Myomas With Total Weight Greater Than 250 Grams, Abdominal Approach	\$1,05
58150	Total Abdominal Hysterectomy (Corpus And Cervix), With Or Without Removal Of Tube(S), With Or Without Removal Of Ovary(S);	\$1,02
	Total Abdominal Hysterectomy (Corpus And Cervix), With Or Without Removal Of Tube(S), With Or Without Removal Of Ovary(S); With Colpo- Urethrocystopexy (Eg, Marshall-Marchetti-Krantz, Burch)	\$1,12
58180	Supracervical Abdominal Hysterectomy (Subtotal Hysterectomy), With Or Without Removal Of Tube(S), With Or Without Removal Of Ovary(S)	\$81
	Total Abdominal Hysterectomy, Including Partial Vaginectomy, With Para-Aortic And Pelvic Lymph Node Sampling, With Or Without Removal	
8200	Of Tube(S), With Or Without Removal Of Ovary(S)	\$1,22
58210	Abdominal Removal Of Uterus, Cervix, And Lymph Nodes On Both Sides Of Pelvis And Aortic Lymph Node Biopsy	\$1,65
	Removal Of Malignant Uterus, Cervix, Lymph Nodes, Bladder, With Transplantation Of Urinary Ducts (Ureters), And Bowel	\$2,67
	Vaginal Removal Of Uterus (250 Grams Or Less)	\$85
	Vaginal Removal Of Uterus (250 Grams Or Less), Tubes, And/Or Ovaries	\$96
	Vaginal Removal Of Uterus (250 Grams Or Less), Tubes, And/Or Ovaries With Repair Of Herniated Bowel	\$90
00203	vaginal Kemoval of Otelus (250 Ofams of Less), Tubes, Ana/of Ovanes with Kepail of Hemateu Bowel	φ90
-0007	Variant United at any With Color Heather control on (Marshall Marshall Variant Tura Days on Tura With On Without Tura Castral)	0.7
	Vaginal Hysterectomy With Colpo-Urethrocystopexy (Marshall-Marchetti-Krantz Type, Pereyra Type, With Or Without Endoscopic Control)	\$97
	Vaginal Hysterectomy With Repair Of Enterocele	\$81
	Vaginal Hysterectomy, With Total Or Partial Vaginectomy;	\$90
	Vaginal Hysterectomy, With Total Or Partial Colpectomy With Repair Of Enterocele	\$96
	Vaginal Removal Of Uterus, Vagina, And Pelvic Lymph Nodes	\$1,29
	Vaginal Hysterectomy, For Uterus Greater Than 250 Grams;	\$1,05
	Vaginal Removal Of Uterus (Greater Than 250 Grams), Tubes, And/Or Ovaries	\$1,13
	Vaginal Removal Of Uterus (Greater Than 250 Grams), Tubes, And/Or Ovaries With Repair Of Herniated Bowel	\$1,19
8294	Vaginal Hysterectomy, For Uterus Greater Than 250 Grams; With Repair Of Enterocele	\$1,11
8300	Insertion Of Intrauterine Device (Iud)	\$12
	Removal Of Intrauterine Device (Iud)	\$11
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	Catheterization And Introduction Of Saline Or Contrast Material For Saline Infusion Sonohysterography (Sis) Or Hysterosalpingography	\$17
	Insertion Of Heyman Capsules For Clinical Brachytherapy	\$46
	Endometrial Ablation, Thermal, Without Hysteroscopic Guidance	\$1,04
8356	Endometrial Cryoablation With Ultrasonic Guidance, Including Endometrial Curettage, When Performed	\$1,68
	Uterine Suspension, With Or Without Shortening Of Round Ligaments, With Or Without Shortening Of Sacrouterine Ligaments; (Separate	
	Procedure)	\$47
8410	Anatomic Repositioning Of Uterus, With Removal Of Nerve	\$74
	Hysterorrhaphy, Repair Of Ruptured Uterus (Nonobstetrical)	\$73
8520	Hysteroplasty, Repair Of Uterine Anomaly (Strassman Type)	\$83
	Laparoscopy, Surgical, Supracervical Hysterectomy, For Uterus 250G Or Less	\$67
58540	-1	\$84
58540 58541	Partial Removal Of Uterus (250 Grams Or Less), Tubes And/Or Ovaries With Retention Of Cervix Using An Endoscope	
58540 58541 58542	Partial Removal Of Uterus (250 Grams Or Less), Tubes And/Or Ovaries With Retention Of Cervix Using An Endoscope Partial Removal Of Literus (Greater Than 250 Grams) With Retention Of Cervix Using An Endoscope	
58540 58541 58542 58543	Partial Removal Of Uterus (Greater Than 250 Grams) With Retention Of Cervix Using An Endoscope	\$77
58540 58541 58542 58543	Partial Removal Of Uterus (Greater Than 250 Grams) With Retention Of Cervix Using An Endoscope Partial Removal Of Uterus (Greater Than 250 Grams), Tubes, And/Or Ovaries Using An Endoscope	
58540 58541 58542 58543 58544	Partial Removal Of Uterus (Greater Than 250 Grams) With Retention Of Cervix Using An Endoscope	\$77

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	Description Removal Of Uterus, Cervix, And Lymph Nodes On Both Sides Of Pelvis And Aortic Lymph Node Biopsy Using An Endoscope	Fee \$1,714.09
	Laparoscopy Surgical, With Vaginal Hysterectomy, For Uterus 250 Grams Or Less;	\$894.14
	Vaginal Removal Of Uterus (250 Grams Or Less), Tubes, And/Or Ovaries Using An Endoscope	\$993.00
	Vaginal Removal Of Uterus (Greater Than 250 Grams) Using An Endoscope	\$1,131.94
	Vaginal Removal Of Uterus (Greater Than 250 Grams), Tubes, And/Or Ovaries With Assistance Of Endoscope	\$1,186.51
58555	Hysteroscopy, Diagnostic (Separate Procedure)	\$259.62
58558	Hysteroscopy, Surgical; With Sampling (Biopsy) Of Endometrium And/Or Polypectomy, With Or Without D & C	\$986.44
58559	Hysteroscopy, Surgical; With Lysis Of Intrauterine Adhesions (Any Method)	\$256.34
	Hysteroscopy, Surgical; With Division Or Resection Of Intrauterine Septum (Any Method)	\$316.79
	Hysteroscopy, Surgical; With Removal Of Leiomyomata	\$357.97
	Hysteroscopy, Surgical; With Removal Of Impacted Foreign Body	\$306.15
	Hysteroscopy, Surgical; With Endometrial Ablation (Eg., Endometrial Resection, Electrosurgical Ablation, Thermoablation)	\$2,393.24
	Laparoscopy, Surgical, With Total Hysterectomy, For Uterus 250 G Or Less;	\$819.14
	Laparoscopy, Surgical, With Total Hysterectomy, For Uterus 250 G Or Less; With Removal Of Tube(S) And/Or Ovary(S)	\$922.35
	Abdominal Removal Of Uterus (Greater Than 250 Grams) Using An Endoscope	\$1,051.54
	Abdominal Removal Of Uterus (Greater Than 250 Grams), Tubes, And/Or Ovaries Using An Endoscope	\$1,233.13
	Removal Of Uterus For Tumor Debulking Using A Laparoscope	\$1,893.43
	Unlisted Laparoscopy Of Uterus Procedure	\$1,776.20
	Unlisted Hysteroscopy Of Uterus Procedure	Price By Report
	Destruction Of Uterine Fibroid(S) Using Heat With Ultrasound Guidance And Monitoring	\$2,729.86
58600	Ligation Or Transection Of Fallopian Tube(S), Abdominal Or Vaginal Approach, Unilateral Or Bilateral	\$378.74
50005	Ligation Or Transection Of Fallopian Tube(S), Abdominal Or Vaginal Approach, Postpartum, Unilateral Or Bilateral, During Same Hospitalization	004540
58605	(Separate Procedure)	\$345.16
E0044	Ligation Or Transection Of Fallopian Tube(S) When Done At The Time Of Cesarean Delivery Or Intra-Abdominal Surgery (Not A Separate	Ф7 Е 00
	Procedure) (List Separately In Addition To Code For Primary Procedure) Occlusion Of Fallopian Tube(S) By Device (Eg, Band, Clip, Falope Ring) Vaginal Or Suprapubic Approach	\$75.69 \$234.33
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	Laparoscopy, Surgical; With Lysis Of Adhesions (Salpingolysis, Ovariolysis) (Separate Procedure) Laparoscopy, Surgical; With Removal Of Adnexal Structures (Partial Or Total Oophorectomy And/Or Salpingectomy)	\$686.86
		\$660.07
	Laparoscopy, Surgical; With Fulguration Or Excision Of Lesions Of The Ovary, Pelvic Viscera, Or Peritoneal Surface By Any Method	\$720.83
	Laparoscopy, Surgical; With Fulguration Of Oviducts (With Or Without Transection)	\$380.19
	Laparoscopy, Surgical; With Occlusion Of Oviducts By Device (Eg, Band, Clip, Or Falope Ring)	\$379.47
	Destruction Of Fibroid Tumor Of Uterus Using A Laparoscope And Ultrasound Guidance And Monitoring	\$742.41
	Unlisted Laparoscopy Procedure, Oviduct, Ovary	\$2,918.04
	Salpingectomy, Complete Or Partial, Unilateral Or Bilateral (Separate Procedure)	\$567.50
	Salpingo-Oophorectomy, Complete Or Partial, Unilateral Or Bilateral (Separate Procedure)	\$640.49
	Lysis Of Adhesions (Salpingolysis, Ovariolysis)	\$820.51
	Salpingostomy (Salpingoneostomy)	\$789.54
	Drainage Of Cysts Of Ovaries By Vaginal Approach	\$341.21
	Drainage Of Cysts Of Ovaries By Abdominal Approach	\$440.43
	Drainage Of Cysts Of Ovaries By Vaginal Approach, Open Procedure	\$315.82
	Drainage Of Ovarian Abscess; Abdominal Approach	\$617.78
	Biopsy Of Ovaries	\$404.58
	Ovarian Cystectomy, Unilateral Or Bilateral Removed Of Ovarian Portici Or Total	\$618.99
	Removal Of Ovaries, Partial Or Total Removal Of Ovaries, Partial Or Total, For Ovarian Cancer	\$574.57
	Resection Of Ovarian, Tubal Or Primary Peritoneal Malignancy With Bilateral Salpingo-Oophorectomy And Omentectomy;	\$1,066.67
	Removal Of Abdominal Lining, Uterus, Both Ovaries And Fallopian Tubes, And Pelvic And Aortic Lymph Nodes	\$1,056.12
58951	Resection Of Ovarian, Tubal Or Primary Peritoneal Malignancy With Bilateral Salpingo-Oophorectomy And Omentectomy; With Radical	\$1,313.50
59052	Dissection For Debulking (le, Radical Excision Or Destruction, Intra-Abdominal Or Retroperitoneal Tumors)	¢1 500 69
	Removal Of Abdominal Lining, Uterus, Both Ovaries And Fallopian Tubes With Tumor Reduction	\$1,500.68 \$1,818.51
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	Removal Of Abdominal Lining, Uterus, Both Ovaries And Fallopian Tubes, And Pelvic And Aortic Lymph Nodes With Tumor Reduction	\$1,966.55
	Removal Of Abdominal Lining, Uterus, And Both Ovaries And Fallopian Tubes	\$1,236.22
	Removal Of Tubes, Ovaries, Uterus, And Lymph Nodes For Uterine Malignancy	\$1,555.30
58958	Removal Of Tubes, Ovaries, Uterus, And Lymph Nodes For Uterine Malignancy, With Lymph Node Dissection	\$1,511.04
	Laparotomy, For Staging Or Restaging Of Ovarian, Tubal Or Primary Peritoneal Malignancy (Second Look), With Or Without Omentectomy,	
58960	Peritoneal Washing, Biopsy Of Abdominal And Pelvic Peritoneum, Diaphragmatic Assessment With Pelvic And Limited Para-Aortic Lymp	\$910.84
	Unlisted Procedure, Female Genital System Nonobstetrical	Price By Report
	Amniocentesis; Diagnostic	\$116.95
	Amniocentesis; Diagnostic Amniocentesis; Therapeutic Amniotic Fluid Reduction (Includes Ultrasound Guidance)	\$170.12
	Cordocentesis (Intrauterine), Any Method	\$172.46
	Chorionic Villus Sampling, Any Method	\$140.87
	Fetal Contraction Stress Test	\$88.43
	Fetal Non-Stress Test	\$53.30
	Fetal Scalp Blood Sampling	\$150.10
	Fetal Monitoring During Labor By Consulting Physician (Ie, Non-Attending Physician) With Written Report; Supervision And Interpretation	\$51.70
	Fetal Monitoring During Labor By Consulting Physician (le, Non-Attending Physician) With Written Report (Separate Procedure); Interpretation	· · · ·
59051		\$51.70
	Transabdominal Amnioinfusion, Including Ultrasound Guidance	\$430.24
	Fetal Umbilical Cord Occlusion, Including Ultrasound Guidance	\$550.76
	Fetal Fluid Drainage (Eg, Vesicocentesis, Thoracocentesis, Paracentesis), Including Ultrasound Guidance	\$416.66
	Fetal Shunt Placement, Including Ultrasound Guidance	\$542.62
	Hysterotomy, Abdominal (Eg., For Hydatidiform Mole, Abortion)	\$751.60
	Removal Of Ovarian Or Tubal Pregnancy, With Removal Of Ovaries	\$717.72
	Removal Of Ovarian Or Tubal Pregnancy, Without Removal Of Ovaries	\$717.95
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	Description	Fee
	Surgical Treatment Of Ectopic Pregnancy Abdominal Pregnancy	\$830.95
	Surgical Treatment Of Ectopic Pregnancy Interstitial, Uterine Pregnancy With Partial Resection Of Uterus	\$788.88
	Surgical Treatment Of Ectopic Pregnancy Cervical, With Evacuation	\$371.83
	Laparoscopic Treatment Of Ectopic Pregnancy Without Salpingectomy And/Or Oophorectomy	\$511.01
	Laparoscopic Treatment Of Ectopic Pregnancy With Salpingectomy And/Or Oophorectomy	\$958.05
	Currettage, Postpartum	\$278.62
	Insertion Of Cervical Dilator (Eg, Laminaria, Prostaglandin) (Separate Procedure)	\$89.78
	Episiotomy Or Vaginal Repair, By Other Than Attending	\$156.26
	Cerclage Of Cervix, During Pregnancy Vaginal	\$430.38
	Cerclage Of Cervix, During Pregnancy Abdominal	\$289.95
59350	Hysterorrhaphy Of Ruptured Uterus	\$367.63
	Routine Obstetric Care Including Antepartum Care, Vaginal Delivery (With Or Without Episiotomy, And/Or Forceps) And Postpartum Care	\$2,183.92
	Vaginal Delivery Only (With Or Without Episiotomy And/Or Forceps);	\$707.07
	Vaginal Delivery Only (With Or Without Episiotomy And/Or Forceps); Including Postpartum Care	\$960.30
	Turning Of Fetus From Abnormal Position By External Manipulation	\$90.66
	Delivery Of Placenta	\$79.15
	Antepartum Care Only; 4-6 Visits	\$513.14
	Antepartum Care Only; 7 Or More Visits	\$937.81
	Postpartum Care Only (Separate Procedure)	\$243.41
	Cesarean Delivery With Pre- And Post-Delivery Care	\$2,405.10
	Caesarean Delivery Only;	\$794.90
	Caesarean Delivery Only; Including Postpartum Care	\$1,182.46
	Subtotal Or Total Hysterectomy After Cesarean Delivery (List Separately In Addition To Code For Primary Procedure)	\$419.81
	Routine Obstetric Care With Vaginal Delivery After Prior Cesarean Delivery	\$2,265.11
59612	Vaginal Delivery Only, After Previous Cesarean Delivery (With Or Without Episiotomy And/Or Forceps);	\$791.41
59614	Vaginal Delivery Only, After Previous Cesarean Delivery (With Or Without Episiotomy And/Or Forceps); Including Postpartum Care	\$1,024.08
	Routine Obstetric Care Including Antepartum Care, Cesarean Delivery, And Postpartum Care, Following Attempted Vaginal Delivery After	
59618	Previous Cesarean Delivery	\$2,427.72
59620	Cesarean Delivery After Vaginal Delivery Attempt Due To Prior Cesarean Delivery	\$819.65
59622	Cesarean Delivery Only, Following Attempted Vaginal Delivery After Previous Cesarean Delivery; Including Postpartum Care	\$1,225.25
59812	Treatment Of Incomplete Abortion, Any Trimester, Completed Surgically	\$332.80
59820	Treatment Of Missed Abortion, Completed Surgically First Trimester	\$416.07
59821	Treatment Of Missed Abortion, Completed Surgically Second Trimester	\$301.71
59830	Treatment Of Septic Abortion, Completed Surgically	\$413.02
	Induced Abortion, By One Or More Vaginal Suppositories (Eg, Prostaglandin) With Or Without Cervical Dilation (Eg, Laminaria), Including	
	Hospital Admission And Visits, Delivery Of Fetus And Secundines;	\$452.47
	Uterine Evacuation And Curettage For Hydatidiform Mole	\$484.94
	Removal Of Cerclage Suture Under Anesthesia (Other Than Local)	\$127.48
	Unlisted Fetal Invasive Procedure, Including Ultrasound Guidance, When Performed	\$516.40
	Unlisted Laparoscopy Procedure, Maternity Care And Delivery	Price By Report
	Unlisted Procedure, Maternity Care And Delivery	Price By Report
	Incision And Drainage Of Thyroglossal Duct Cyst, Infected	\$174.21
	Needle Biopsy Of Thyroid, Accessed Through The Skin	\$98.63
	Excision Of Cyst Or Adenoma Of Thyroid, Or Transection Of Isthmus Partial Thyroid Lobectomy, Unilateral; With Or Without Isthmusectomy	\$607.83
	Partial Thyroid Lobectomy, Unilateral, With Contralateral Subtotal Lobectomy, Including Isthmusectomy	\$732.83 \$915.80
	Total Thyroid Lobectomy, Unilateral; With Or Without Isthmusectomy	\$713.00
	Total Thyroid Lobectomy, Unilateral; With Contralateral Subtotal Lobectomy, Including Isthmusectomy	\$852.69
	Removal Of Thyroid, Complete	\$919.72
	Removal Of Thyroid And Surrounding Lymph Nodes, With Limited Neck Dissection	\$1,244.21
	Removal Of Thyroid And Surrounding Lymph Nodes, With Radical Neck Dissection	\$1,501.85
	Thyroidectomy, Removal Of All Remaining Thyroid Tissue Following Previous Removal Of A Portion Of Thyroid	\$983.17
	Removal Of Thyroid, Sternal Or Transthoracic Approach	\$1,223.82
	Removal Of Thyroid, Sternal Or Cervical Approach	\$952.17
	Excision Of Thyroglossal Duct Cyst Or Sinus	\$467.64
	Excision Of Thyroglossal Duct Cyst Or Sinus; Recurrent	\$550.62
	Aspiration And/Or Injection, Thyroid Cyst	\$103.16
	Parathyroidectomy Or Exploration Of Parathyroid(S);	\$968.70
	Parathyroidectomy Or Exploration Of Parathyroid(S); Re-Exploration	\$1,314.03
	Parathyroidectomy Or Exploration Of Parathyroid(S); With Mediastinal Exploration, Sternal Split Or Transthoracic Approach	\$1,262.76
60512	Parathyroid Autotransplantation (List Separately In Addition To Code For Primary Procedure)	\$237.72
60520	Thymectomy, Partial Or Total; Transcervical Approach (Separate Procedure)	\$936.65
	Removal Of Thymus Gland, Sternal Or Chest Approach	\$984.65
60522	Removal Of Thymus Gland Surrounding Lymph Nodes, Sternal Or Chest Approach	\$1,199.28
60540	Adrenalectomy, Partial Or Complete, Or Exploration Of Adrenal Gland With Or Without Biopsy, Transabdominal, Lumbar Or Dorsal (Separate Procedure)	\$1,069.98
	Adrenalectomy, Partial Or Complete, Or Exploration Of Adrenal Gland With Or Without Biopsy, Transabdominal, Lumbar Or Dorsal (Separate	
	Procedure), Unilateral; With Excision Of Adjacent Retroperitoneal Tumor	\$1,110.55
60600	Excision Of Carotid Body Tumor Without Excision Of Carotid Artery	\$1,192.45
60600	Excision Of Carotid Body Tumor Without Excision Of Carotid Artery Excision Of Carotid Body Tumor With Excision Of Carotid Artery	\$1,192.45 \$1,415.46
60600 60605	Excision Of Carotid Body Tumor Without Excision Of Carotid Artery Excision Of Carotid Body Tumor With Excision Of Carotid Artery Laparoscopy, Surgical, With Adrenalectomy, Partial Or Complete, Or Exploration Of Adrenal Gland With Or Without Biopsy, Transabdominal,	\$1,415.46
60600 60605 60650	Excision Of Carotid Body Tumor Without Excision Of Carotid Artery Excision Of Carotid Body Tumor With Excision Of Carotid Artery Laparoscopy, Surgical, With Adrenalectomy, Partial Or Complete, Or Exploration Of Adrenal Gland With Or Without Biopsy, Transabdominal, Lumbar Or Dorsal	\$1,415.46 \$1,059.96
60600 60605 60650 60659	Excision Of Carotid Body Tumor Without Excision Of Carotid Artery Excision Of Carotid Body Tumor With Excision Of Carotid Artery Laparoscopy, Surgical, With Adrenalectomy, Partial Or Complete, Or Exploration Of Adrenal Gland With Or Without Biopsy, Transabdominal, Lumbar Or Dorsal Unlisted Laparoscopy Procedure, Endocrine System	\$1,415.46 \$1,059.96 Price By Report
60600 60605 60650 60659 60699	Excision Of Carotid Body Tumor Without Excision Of Carotid Artery Excision Of Carotid Body Tumor With Excision Of Carotid Artery Laparoscopy, Surgical, With Adrenalectomy, Partial Or Complete, Or Exploration Of Adrenal Gland With Or Without Biopsy, Transabdominal, Lumbar Or Dorsal	\$1,415.46 \$1,059.96

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Code Description 61001 Aspiration Of Spinal Fluid From Infant Skull Soft Spot, Subsequent	Fee \$101.45
61020 Aspiration Of Spinal Fluid From Finant Skull Soft Spot, Burr Hole, Or Catheter In Brain	\$105.81
61026 Aspiration Of Spinal Fluid And Injection Into Skull Soft Spot, Burr Hole, Or Catheter In Ventricle Of Brain	\$94.69
61050 Cisternal Or Lateral Cervical (C1-C2) Puncture; Without Injection (Separate Procedure)	\$74.29
61055 Spinal Puncture In Upper Spine With Injection Of Substance	\$105.99
61070 Puncture Of Shunt Tubing Or Reservoir For Aspiration Or Injection Procedure	\$48.71
61105 Twist Drill Hole For Aspiration Of Fluid From Brain	\$452.46
61107 Twist Drill Hole For Insertion Of Brain Drainage Catheter Or Fluid Pressure Recording Or Monitoring Device	\$290.89
61108 Twist Drill Hole For Aspiration And/Or Drainage Of Blood Accumulation In Brain	\$877.82
61120 Burr Hole(S) For Injection Into Ventricle Of Brain	\$653.09
61140 Burr Hole(S), With Drainage Or Biopsy Of Brain Or Lesion 61150 Burr Hole(S), With Drainage Of Brain Abscess Or Cyst	\$1,096.96 \$1,159.39
61151 Burr Hole(S), With Subsequent Aspiration Of Brain Abscess Or Cyst	\$857.92
61154 Burr Hole(S), With Aspiration Of Blood Accumulation In Brain, Extradural Or Subdural	\$1,227.78
61156 Burr Hole(S), With Aspiration Of Blood Accumulation Or Cyst In Brain	\$1,066.26
61210 Burr Hole(S), Implantation Of Brain Catheter, Reservoir, Eeg Electrodes, Pressure Or Other Monitoring Device	\$340.60
61215 Insertion Of Subcutaneous Reservoir, Pump Or Continuous Infusion System For Connection To Ventricular Catheter	\$454.04
61250 Burr Hole(S) For Exploration Of The Upper Brain	\$752.62
61253 Burr Hole(S) For Exploration Of The Lower Brain	\$857.92
61304 Removal Of Bone From Skull For Exploration Of Upper Brain	\$1,564.20
61305 Removal Of Bone From Skull For Exploration Of Lower Brain	\$1,905.98
61312 Removal Of Bone From Skull For Aspiration Of Blood Accumulation In Upper Brain, Extradural Or Subdural	\$2,031.37
61313 Removal Of Bone From Skull For Aspiration Of Blood Accumulation In Upper Brain, Intracerebral 61314 Removal Of Bone From Skull For Aspiration Of Blood Accumulation In Lower Brain, Extradural Or Subdural	\$1,953.13 \$1,569.56
61315 Removal Of Bone From Skull For Aspiration Of Blood Accumulation In Lower Brain, Extradural Of Subdural 61315 Removal Of Bone From Skull For Aspiration Of Blood Accumulation In Lower Brain, Intracerebellar	\$1,764.57
61316 Incision And Subcutaneous Placement Of Cranial Bone Graft (List Separately In Addition To Code For Primary Procedure)	\$1,764.57
61320 Removal Of Bone From Skull For Drainage Of Upper Brain Abscess	\$1,820.44
61321 Removal Of Bone From Skull For Drainage Of Lower Brain Abscess	\$1,814.79
Craniectomy Or Craniotomy, Decompressive, With Or Without Duraplasty, For Treatment Of Intracranial Hypertension, Without Evac	
61322 Associated Intraparenchymal Hematoma; Without Lobectomy	\$2,334.22
Craniectomy Or Craniotomy, Decompressive, With Or Without Duraplasty, For Treatment Of Intracranial Hypertension, Without Evac	
61323 Associated Intraparenchymal Hematoma; With Lobectomy	\$2,361.79
61330 Decompression Of Orbit Only, Transcranial Approach	\$1,537.35
61333 Exploration And Removal Of Lesion From Bone Of Eye Socket Accessed Through Skull 61340 Subtemporal Cranial Decompression (Pseudotumor Cerebri, Slit Ventricle Syndrome)	\$1,719.19
Craniectomy, Suboccipital With Cervical Laminectomy For Decompression Of Medulla And Spinal Cord, With Or Without Dural Graft	\$1,236.34
61343 Arnold-Chiari Malformation)	\$2,086.22
61345 Other Cranial Decompression, Posterior Fossa	\$1,746.22
61450 Craniectomy For Section, Compression, Or Decompression Of Sensory Root Of Gasserian Ganglion	\$1,638.69
61458 Craniectomy, Suboccipital; For Exploration Or Decompression Of Cranial Nerves	\$1,914.70
61460 Craniectomy, Suboccipital; For Section Of One Or More Cranial Nerves	\$1,799.81
61500 Craniectomy, Trephination, Bone Flap Craniotomy; For Tumor Of Skull	\$1,275.84
61501 Craniectomy; For Osteomyelitis	\$1,002.58
61510 Removal Of Bone From Skull For Removal Of Upper Brain Tumor	\$2,160.38
61512 Removal Of Bone From Skull For Removal Of Upper Membrane Tumor 61514 Removal Of Bone From Skull For Removal Of Upper Brain Abscess	\$2,283.84
61516 Removal Of Bone From Skull For Removal Or Drainage Of Upper Brain Cyst	\$1,640.01 \$1,781.48
61517 Implantation Of Brain Intracavitary Chemotherapy Agent (List Separately In Addition To Code For Primary Procedure)	\$72.84
61518 Removal Of Bone From Skull For Removal Of Lower Brain Tumor	\$2,664.54
61519 Removal Of Bone From Skull For Removal Of Lower Membrane Tumor	\$2,500.90
61520 Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor	\$3,205.91
61521 Removal Of Bone From Skull For Removal Of Skull Base Tumor	\$3,092.48
61522 Removal Of Bone From Skull For Removal Of Brain Abscess	\$1,868.28
61524 Removal Of Bone From Skull For Removal Of Brain Cyst Or Creation Of Drainage Tract	\$1,781.21
61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor	\$2,932.64
61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal	/al \$2,607.02
	\$1,059.54
61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring	\$1,310.27
61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring	\$1,419.11
61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring	
61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain	\$872.48
61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring	\$2,193.85
61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring	\$2,193.85 \$2,087.01
61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring	\$2,193.85 \$2,087.01 \$2,258.03
61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring	\$2,193.85 \$2,087.01 \$2,258.03 \$2,012.85
61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring	\$2,193.85 \$2,087.01
61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring 61540 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring	\$2,193.85 \$2,087.01 \$2,258.03 \$2,012.85 \$1,857.78
61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring 61540 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring 61541 Removal Of Bone From Skull For Incision Of Brain Tissue	\$2,193.85 \$2,087.01 \$2,258.03 \$2,012.85 \$1,857.78 \$2,001.52
61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring 61540 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring 61541 Removal Of Bone From Skull For Incision Of Brain Tissue 61543 Removal Of Bone From Skull For Partial Excision Of Brain Tissue 61544 Removal Of Bone From Skull For Excision Or Clotting Of Cerebrospinal Fluid Site 61545 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor, With Elevation Of Bone Flap	\$2,193.85 \$2,087.01 \$2,258.03 \$2,012.85 \$1,857.78 \$2,001.52 \$1,856.02 \$1,620.97 \$2,712.27
61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring 61540 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring 61541 Removal Of Bone From Skull For Excision Of Brain Tissue 61543 Removal Of Bone From Skull For Partial Excision Of Brain Tissue 61544 Removal Of Bone From Skull For Excision Of Clotting Of Cerebrospinal Fluid Site 61545 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor, With Elevation Of Bone Flap 61546 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor	\$2,193.85 \$2,087.01 \$2,258.03 \$2,012.85 \$1,857.78 \$2,001.52 \$1,856.02 \$1,620.97 \$2,712.27 \$1,968.23
61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring 61540 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring 61541 Removal Of Bone From Skull For Excision Of Brain Tissue 61543 Removal Of Bone From Skull For Partial Excision Of Brain Tissue 61544 Removal Of Bone From Skull For Partial Excision Of Brain Tissue 61545 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor, With Elevation Of Bone Flap 61546 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor 61548 Hypophysectomy Or Excision Of Pituitary Tumor, Transnasal Or Transseptal Approach, Nonstereotactic	\$2,193.85 \$2,087.01 \$2,258.03 \$2,012.85 \$1,857.78 \$2,001.52 \$1,856.02 \$1,620.97 \$2,712.27 \$1,968.23 \$1,512.53
61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring 61540 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring 61541 Removal Of Bone From Skull For Incision Of Brain Tissue 61543 Removal Of Bone From Skull For Partial Excision Of Brain Tissue 61544 Removal Of Bone From Skull For Excision Of Clotting Of Cerebrospinal Fluid Site 61545 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor, With Elevation Of Bone Flap 61548 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor 61548 Hypophysectomy Or Excision Of Pituitary Tumor, Transnasal Or Transseptal Approach, Nonstereotactic 61550 Craniectomy For Craniosynostosis; Single Cranial Suture	\$2,193.85 \$2,087.01 \$2,258.03 \$2,012.85 \$1,857.78 \$2,001.52 \$1,856.02 \$1,620.97 \$2,712.27 \$1,968.23 \$1,512.53 \$1,038.70
61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring 61540 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring 61541 Removal Of Bone From Skull For Incision Of Brain Tissue 61543 Removal Of Bone From Skull For Partial Excision Of Brain Tissue 61544 Removal Of Bone From Skull For Excision Of Clotting Of Cerebrospinal Fluid Site 61545 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor, With Elevation Of Bone Flap 61546 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor 61548 Hypophysectomy Or Excision Of Pituitary Tumor, Transnasal Or Transseptal Approach, Nonstereotactic 61550 Craniectomy For Craniosynostosis; Single Cranial Suture	\$2,193.85 \$2,087.01 \$2,258.03 \$2,012.85 \$1,857.78 \$2,001.52 \$1,856.02 \$1,620.97 \$2,712.27 \$1,968.23 \$1,512.53 \$1,038.70 \$1,281.64
61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring 61540 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring 61541 Removal Of Bone From Skull For Incision Of Brain Tissue 61543 Removal Of Bone From Skull For Partial Excision Of Brain Tissue 61544 Removal Of Bone From Skull For Excision Of Clotting Of Cerebrospinal Fluid Site 61545 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor 61548 Hypophysectomy Or Excision Of Pituitary Tumor, Transnasal Or Transseptal Approach, Nonstereotactic 61550 Craniectomy For Craniosynostosis; Single Cranial Suture	\$2,193.85 \$2,087.01 \$2,258.03 \$2,012.85 \$1,857.78 \$2,001.52 \$1,856.02 \$1,620.97 \$2,712.27 \$1,968.23 \$1,512.53 \$1,038.70

Code	Description	Fee
	Extensive Craniectomy For Multiple Cranial Suture Craniosynostosis (Eg, Cloverleaf Skull); Recontouring With Multiple Osteotomies And Bone	
	Autografts (Eg, Barrel-Stave Procedure) (Includes Obtaining Grafts)	\$2,184.16
	Excision, Intra- And Extracranial, Benign Tumor Of Cranial Bone (Eg, Fibrous Dysplasia); Without Optic Nerve Decompression	\$1,695.07
	Excision, Intra- And Extracranial, Benign Tumor Of Cranial Bone (Eg, Fibrous Dysplasia); With Optic Nerve Decompression	\$2,053.38
	Craniotomy With Elevation Of Bone Flap; For Selective Amygdalohippocampectomy	\$1,911.69
	Craniotomy With Elevation Of Bone Flap; For Multiple Subpial Transections, With Electrocorticography During Surgery Craniectomy Or Craniotomy; With Excision Of Foreign Body From Brain	\$2,176.18
	Craniectomy Or Craniotomy; For Penetrating Wound Of Brain	\$1,682.61 \$1,826.83
	Transoral Approach To Skull Base, Brain Stem Or Upper Spinal Cord For Biopsy, Decompression Or Excision Of Lesion;	\$2,132.72
	Biopsy Of Brain Stem Or Upper Spinal Cord, Requiring Splitting Of Tongue And/Or Mandible	\$3,616.82
	Removal Of Nasal Sinuses To Approach Brain Lesion Without The Removal Of The Maxilla Or Eyeball	\$2,287.46
	Removal Of Nasal Sinuses To Approach Brain Lesion With The Removal Of The Maxilla Or Eyeball	\$2,627.07
	Removal Of Facial Bone To Approach Brain Lesion, Extradural	\$2,697.19
	Removal Of Facial Bone To Approach Brain Lesion, Intradural	\$2,559.96
	Removal Of Facial Bone To Approach Brain Lesion, Without Removal Of The Eyeball	\$2,435.40
61585	Removal Of Facial Bone To Approach Brain Lesion, With Removal Of The Eyeball	\$2,867.49
61586	Removal Of Facial Bone To Approach Brain Lesion, Without Bone Graft	\$2,273.63
	Infratemporal Pre-Auricular Approach To Middle Cranial Fossa (Parapharyngeal Space, Infratemporal And Midline Skull Base, Nasopharynx),	
61590	With Or Without Disarticulation Of The Mandible, Including Parotidectomy, Craniotomy, Decompression And/Or Mobiliz	\$2,764.86
61591	Removal Of Skull Bone Behind Ear To Approach Brain Lesion, Infratemporal Post-Auricular Approach	\$2,769.95
	Orbitocranial Zygomatic Approach To Middle Cranial Fossa (Cavernous Sinus And Carotid Artery, Clivus, Basilar Artery Or Petrous Apex)	
61592	Including Osteotomy Of Zygoma, Craniotomy, Extra- Or Intradural Elevation Of Temporal Lobe	\$2,770.72
	Removal Of Skull Bone Behind Ear To Approach Brain Lesion Through The Temporal Lobe	\$2,165.01
61596	Removal Of Skull Bone Behind Ear To Approach Brain Lesion Through The Ear	\$2,251.25
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	Transcondylar (Far Lateral) Approach To Posterior Cranial Fossa, Jugular Foramen Or Midline Skull Base, Including Occipital Condylectomy,	
61597	Mastoidectomy, Resection Of C1-C3 Vertebral Body(S), Decompression Of Vertebral Artery, With Or Without Mobilization	\$2,673.99
04500	Transpetrosal Approach To Posterior Cranial Fossa, Clivus Or Foramen Magnum, Including Ligation Of Superior Petrosal Sinus And/Or	#0.407.00
	Sigmoid Sinus Removed Of Turner Or Tissue Abnormality Of Front Of Skull Ress (Anterior Essae) Outside Mambrages Cavering Prain	\$2,497.89 \$1.947.05
	Removal Of Tumor Or Tissue Abnormality Of Front Of Skull Base (Anterior Fossa) Outside Membranes Covering Brain Removal Of Tumor Or Tissue Abnormality Of Front Of Skull Base (Anterior Fossa) Within Membranes Covering Brain	* /
	Removal Of Tumor Or Tissue Abnormality Of Lower Skull Base (Infratemporal Fossa, Parapharyngeal Space, Petrous Apex) External To	\$1,937.15
	Membranes Covering Brain, Extradural	\$2,001.47
01000	Removal Of Tumor Or Tissue Abnormality Of Lower Skull Base (Infratemporal Fossa, Parapharyngeal Space, Petrous Apex) Within	Ψ2,001.47
61606	Membranes Covering Brain, Intradural	\$2,561.50
	Removal Of Tumor Or Tissue Abnormality Of Middle Of Skull Base (Infratemporal Fossa, Parapharyngeal Space, Petrous Apex) External To	
	Membranes Covering Brain, Extradural	\$2,384.81
	Removal Of Tumor Or Tissue Abnormality Of Middle Of Skull Base (Infratemporal Fossa, Parapharyngeal Space, Petrous Apex) Within	. ,
61608	Membranes Covering Brain, Intradural	\$2,832.83
61611	Transection Or Ligation, Carotid Artery In Petrous Canal; Without Repair (List Separately In Addition To Code For Primary Procedure)	\$390.77
	Obliteration Of Carotid Aneurysm, Arteriovenous Malformation, Or Carotid-Cavernous Fistula By Dissection Within Cavernous Sinus	\$2,842.30
	Excision Of Abnormal Blood Vessel At Skull Base Or Upper Spine Bones, Extradural	\$2,467.13
61616	Excision Of Abnormal Blood Vessel At Skull Base Or Upper Spine Bones, Intradural	\$3,057.16
	Secondary Repair Of Dura For Cerebrospinal Fluid Leak, Anterior, Middle Or Posterior Cranial Fossa Following Surgery Of The Skull Base; By Free Tissue Graft (Eg, Pericranium, Fascia, Tensor Fascia Lata, Adipose Tissue, Homologous Or Synthetic Grafts)	\$1,126.63
01010	The Hissue Graft (Eg. Fericialitum, Fascia, Ferisor Fascia Lata, Aupose Hissue, Florifologous Of Synthetic Grafts)	ψ1,120.03
	Secondary Repair Of Dura For Csf Leak, Anterior, Middle Or Posterior Cranial Fossa Following Surgery Of The Skull Base; By Local Or	
	Regionalized Vascularized Pedicle Flap Or Myocutaneous Flap (Including Galea, Temporalis, Frontalis Or Occipitalis Mus	\$1,259.25
	Endovascular Temporary Balloon Arterial Occlusion, Head Or Neck (Extracranial/Intracranial) Including Selective Catheterization Of Vessel To	
	Be Occluded, Positioning And Inflation Of Occlusion Balloon, Concomitant Neurological Monitoring, And	\$495.38
	Occlusion Of Abnormal Artery, Accessed Through The Skin	\$1,101.58
	Occlusion Of Head Or Neck Artery, Accessed Through The Skin	\$870.17
61630	Balloon Dilation Of Blood Vessel In Head, Accessed Through The Skin	\$1,184.22
61625	Transcatheter Placement Of Intravascular Stent(S), Intracranial (Eg, Atherosclerotic Stenosis), Including Balloon Angioplasty, If Performed	\$1,493.17
	Balloon Dilation Of Blood Vessel Spasm In Head, Accessed Through The Skin	\$523.71
	Balloon Dilation Of Additional Blood Vessel Spasm In Head In Same Blood Vessel Family, Accessed Through The Skin	\$227.06
	Balloon Dilation Of Additional Blood Vessel Spasm in Head In Different Blood Vessel Family, Accessed Through The Skin	\$437.30
	Removal Of Blood Clot And Injection To Dissolve Blood Clot From Head Artery Using Fluoroscopic Guidance, Accessed Through Skin	\$814.53
	Infusion Of Chemical Agent Into The Artery Of Brain With Insertion Of Catheter And Imaging, Initial Territory	\$554.97
	Infusion Of Chemical Agent Into The Artery Of Brain With Insertion Of Catheter And Imaging, Each Additional Territory	\$236.17
	Repair Of Abnormal Artery-Vein Connection In Brain, Supratentorial, Simple	\$2,147.21
61682	Repair Of Abnormal Artery-Vein Connection In Brain, Supratentorial, Complex	\$3,512.27
61684	Repair Of Abnormal Artery-Vein Connection In Brain, Infratentorial, Simple	\$2,416.80
61686	Repair Of Abnormal Artery-Vein Connection In Brain, Infratentorial, Complex	\$3,794.42
	Repair Of Abnormal Artery-Vein Connection In Brain, Dural, Simple	\$1,861.37
	Repair Of Abnormal Artery-Vein Connection In Brain, Dural, Complex	\$3,086.48
	Repair Of Complex Bulging Of Blood Vessel (Aneurysm) Of Carotid Artery Circulation In Brain By Incision Of Skull	\$3,572.68
	Repair Of Complex Bulging Of Blood Vessel (Aneurysm) Of Vertebrobasilar Circulation In Brain By Incision Of Skull	\$3,906.74
	Repair Of Simple Bulging Of Blood Vessel (Aneurysm) Of Carotid Artery Circulation In Brain By Incision Of Skull	\$2,890.60
61702	Repair Of Simple Bulging Of Blood Vessel (Aneurysm) Of Vertebrobasilar Circulation In Brain By Incision Of Skull	\$3,401.69
04===		.
	Surgery For Bulging Of Blood Vessel (Aneurysm) Of Carotid Artery Circulation In Brain By Clamping Of Carotid Artery Via Incision Of Neck	\$1,170.06
	Surgery For Abnormal Blood Vessel In Brain By Clamping Of Carotid Artery Via Incision Of Neck And Tying Of Abnormal Blood Vessel Via	¢0.04.4.00
	Incision Of Skull Creation Of Clot In Abnormal Blood Vessel In Brain Lising Flactricity. Via Incision Of Skull	\$2,214.20
01/08	Creation Of Clot In Abnormal Blood Vessel In Brain Using Electricity, Via Incision Of Skull	\$2,166.62

Code Description 61710 Surgical Creation Of Obstruction In Abnormal Blood Vessel In Brain 61711 Anastomosis, Arterial, Extracranial-Intracranial (Eg, Middle Cerebral/Cortical) Arteries 61720 Creation Of Brain Lesion By Stereotactic Method, Globus Pallidus Or Thalamus 61735 Creation Of Brain Lesion By Stereotactic Method, Other Than Globus Pallidus Or Thalamus 61736 Laser Interstitial Thermal Therapy (Litt) Of Single, Simple Growth Within Skull 61737 Laser Interstitial Thermal Therapy (Litt) Of Multiple Or Complex Growth Within Skull 61750 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion 61751 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion Using Ct And/Or Mri Guidance	\$1,828.10 \$2,196.98
61711 Anastomosis, Arterial, Extracranial-Intracranial (Eg, Middle Cerebral/Cortical) Arteries 61720 Creation Of Brain Lesion By Stereotactic Method, Globus Pallidus Or Thalamus 61735 Creation Of Brain Lesion By Stereotactic Method, Other Than Globus Pallidus Or Thalamus 61736 Laser Interstitial Thermal Therapy (Litt) Of Single, Simple Growth Within Skull 61737 Laser Interstitial Thermal Therapy (Litt) Of Multiple Or Complex Growth Within Skull 61750 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion 61751 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion Using Ct And/Or Mri Guidance	\$2,196.98
61720 Creation Of Brain Lesion By Stereotactic Method, Globus Pallidus Or Thalamus 61735 Creation Of Brain Lesion By Stereotactic Method, Other Than Globus Pallidus Or Thalamus 61736 Laser Interstitial Thermal Therapy (Litt) Of Single, Simple Growth Within Skull 61737 Laser Interstitial Thermal Therapy (Litt) Of Multiple Or Complex Growth Within Skull 61750 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion 61751 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion Using Ct And/Or Mri Guidance	
61735 Creation Of Brain Lesion By Stereotactic Method, Other Than Globus Pallidus Or Thalamus 61736 Laser Interstitial Thermal Therapy (Litt) Of Single, Simple Growth Within Skull 61737 Laser Interstitial Thermal Therapy (Litt) Of Multiple Or Complex Growth Within Skull 61750 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion 61751 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion Using Ct And/Or Mri Guidance	\$1,094.75
61736 Laser Interstitial Thermal Therapy (Litt) Of Single, Simple Growth Within Skull 61737 Laser Interstitial Thermal Therapy (Litt) Of Multiple Or Complex Growth Within Skull 61750 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion 61751 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion Using Ct And/Or Mri Guidance	\$1,371.03
61750 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion 61751 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion Using Ct And/Or Mri Guidance	\$765.12
61751 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion Using Ct And/Or Mri Guidance	\$909.94
	\$1,344.93
04700 Ctavastastia Insulantatian Of Danth Flastradas Into The Carabanna Factor of Tarres October Manifester	\$1,329.85
61760 Stereotactic Implantation Of Depth Electrodes Into The Cerebrum For Long Term Seizure Monitoring	\$1,512.71
61770 Stereotactic Localization, Including Burr Hole(S), With Insertion Of Catheter(S) Or Probe(S) For Placement Of Radiation Source	\$1,388.29
61781 Stereotactic Computer-Assisted (Navigational) Procedure; Cranial, Intradural (List Separately In Addition To Code For Primary Procedure)	\$218.72
61782 Stereotactic Computer-Assisted (Navigational) Procedure; Cranial, Extradural (List Separately In Addition To Code For Primary Procedure)	\$173.91
61783 Stereotactic Computer-Assisted (Navigational) Procedure; Spinal (List Separately In Addition To Code For Primary Procedure)	\$218.54
61790 Stereotactic Creation Of Lesion Of Cranial Nerve, Accessed Through The Skin	\$768.84
61791 Stereotactic Creation Of Brainstem Lesion, Accessed Through The Skin	\$972.83
61796 Stereotactic Treatment Of Brain Growth, 1 Simple Lesion	\$891.73
61797 Stereotactic Treatment Of Brain Growth, Each Additional Simple Lesion	\$183.19
61798 Stereotactic Treatment Of Brain Growth, 1 Complex Lesion	\$1,168.41
61799 Stereotactic Treatment Of Brain Growth, Each Additional Complex Lesion	\$252.96
61800 Application Of Stereotactic Headframe For Stereotactic Radiosurgery (List Separately In Addition To Code For Primary Procedure)	\$142.41
61850 Twist Drill Or Burr Hole(S) For Implantation Of Neurostimulator Electrodes Cortical 61860 Removal Of Bone Of Skull For Implantation Of Neurostimulator Electrodes In Brain	\$852.88
61863 Removal Of Bone Of Skull For Implantation Of Neurostimulator Electrodes in Brain, First Array	\$1,339.40 \$1,483.08
61864 Removal Of Bone Of Skull For Implantation Of Neurostimulator Electrodes In Brain, Each Additional Array	\$262.34
Twist Drill, Burr Hole, Craniotomy, Or Craniectomy With Stereotactic Implantation Of Neurostimulator Electrode Array In Subcortical Site (Eg, 61867 Thalamus, Globus Pallidus, Subthalamic Nucleus, Periventricular, Periaqueductal Gray), With Use Of Intraoper	\$1,943.40
Twist Drill, Burr Hole, Craniotomy, Or Craniectomy With Stereotactic Implantation Of Neurostimulator Electrode Array In Subcortical Site (Eg,	
61868 Thalamus. Globus Pallidus, Subthalamic Nucleus, Periventricular, Periaqueductal Gray), With Use Of Intraoper	\$416.57
61880 Revision Or Removal Of Intracranial Neurostimulator Electrodes	\$515.50
61885 Insertion Or Replacement Of Brain Neurostimulator Generator Or Receiver With Connection To A Single Electrode	\$341.59
61886 Insertion Or Replacement Of Brain Neurostimulator Generator Or Receiver With Connection To Multiple Electrodes	\$807.32
61888 Revision Or Removal Of Cranial Neurostimulator Pulse Generator Or Receiver	\$347.73
62000 Elevation Of Depressed Skull Fracture, Simple	\$847.65
62005 Elevation Of Depressed Skull Fractures, Compound Or Comminuted	\$1,095.40
62010 Elevation Of Depressed Skull Fracture, With Repair And/Or Debridement Of Brain	\$1,469.66
62100 Craniotomy For Repair Of Dural/Cerebrospinal Fluid Leak, Including Surgery For Rhinorrhea/Otorrhea	\$1,501.69
62115 Reduction Of Craniomegalic Skull (Eg, Treated Hydrocephalus); Not Requiring Bone Grafts Or Cranioplasty	\$1,454.41
Reduction Of Craniomegalic Skull (Eg, Treated Hydrocephalus); Requiring Craniotomy And Reconstruction With Or Without Bone Autograft	0.4.070.00
62117 (Includes Obtaining Grafts)	\$1,679.03
62120 Repair Of Encephalocele, Skull Vault, Including Cranioplasty 62121 Craniotomy With Repair Of Encephalocele, Skull Base	\$1,834.92 \$1,405.29
62140 Repair Of Skull Bone Defect, 5 Cm Or Less	\$991.15
62141 Repair Of Skull Bone Defect, More Than 5.0 Cm	\$1,102.05
62142 Removal Of Skull Bone Flap Or Skull Plate	\$864.29
62143 Replacement Of Skull Bone Flap Or Skull Plate	\$908.05
62145 Cranioplasty For Skull Defect With Reparative Brain Surgery	\$1,210.85
62146 Repair Of Skull Bone With Graft, 5.0 Cm Or Less	\$1,076.81
62147 Repair Of Skull Bone With Graft, More Than 5.0 Cm	\$1,342.19
62148 Removal Of Skull Bone Graft, Accessed Beneath The Skin	\$117.26
Neuroendoscopy, Intracranial, For Placement Or Replacement Of Ventricular Catheter And Attachment To Shunt System Or External Drainage (List Separately In Addition To Code For Primary Procedure)	\$158.05
Neuroendoscopy, Intracranial; With Dissection Of Adhesions, Fenestration Of Septum Pellucidum Or Intraventricular Cysts (Including 62161 Placement, Replacement, Or Removal Of Ventricular Catheter) Neuroendoscopy, Intracranial; With Fenestration Or Excision Of Colloid Cyst, Including Placement Of External Ventricular Catheter For	\$1,498.82
62162 Drainage	\$1,617.71
62164 Neuroendoscopy, Intracranial; With Excision Of Brain Tumor, Including Placement Of External Ventricular Catheter For Drainage	\$1,795.96
62165 Neuroendoscopy, Intracranial; With Excision Of Pituitary Tumor, Transnasal Or Trans-Sphenoidal Approach	\$1,336.66
62180 Ventriculocisternostomy (Torkildsen Type Operation)	\$1,371.28
62190 Creation Of Brain Fluid Drainage Shunt, Sub-Atrial, -Jugular, -Auricular	\$807.78
62192 Creation Of Brain Fluid Drainage Shunt, Sub-Peritoneal, -Pleural, Other Terminus	\$857.26
62194 Replacement Or Irrigation, Subdural Catheter	\$435.06
62200 Creation Of An Opening For Brain Fluid Drainage, Third Ventricle	\$1,182.79
62201 Ventriculocisternostomy, Third Ventricle; Stereotactic, Neuroendoscopic Method	\$1,050.32
62220 Creation Of Brain Fluid Drainage Shunt, Ventriculo-Atrial, -Jugular, -Auricular	\$939.45
62223 Creation Of Brain Fluid Drainage Shunt, Ventriculo-Peritoneal, -Pleural, Other Terminus	\$1,027.70
62225 Replacement Or Irrigation, Ventricular Catheter	\$398.10
62230 Replacement Or Revision Of Cerebrospinal Fluid Shunt, Obstructed Valve, Or Distal Catheter In Shunt System	\$813.70
62252 Reprogramming Of Programmable Cerebrospinal Shunt 62256 Removal Of Complete Cerebrospinal Fluid Shunt System; Without Replacement	\$82.49
62258 Removal Of Complete Cerebrospinal Fluid Shunt System; Without Replacement 62258 Removal Of Complete Shunt System; With Replacement By Similar Or Other Shunt At Same Operation	\$532.55 \$1.072.19
Injection Or Mechanical Removal Of Spinal Canal Scar Tissue, Percutaneous Procedure, Accessed Through The Skin, Multiple Sessions Over 62263 2 Or More Days	\$1,072.19 \$610.68
Injection Or Mechanical Removal Of Spinal Canal Scar Tissue, Percutaneous Procedure, Accessed Through The Skin, Multiple Sessions In 1 62264 Day	\$424.90

	Description	Fee
	Diagnostic Aspiration Of Spinal Disc Or Tissue, Accessed Through The Skin	\$271.22
	Aspiration Of Spinal Cord Cyst Or Fluid-Filled Cavity, Accessed Through The Skin Needle Biopsy Of Spinal Cord, Accessed Beneath The Skin	\$234.60 \$240.11
	Spinal Tap For Diagnosis	\$132.25
	Spinal Tap With Drainage Of Spinal Fluid	\$177.51
	Injection, Epidural, Of Blood Or Clot Patch	\$177.06
62280	Injection/Infusion Of Neurolytic Substance (Eg, Alcohol, Phenol, Iced Saline Solutions), With Or Without Other Therapeutic Substance; Subarachnoid	\$316.14
	Injection Of Spinal Canal To Destroy Nerve In The Upper Spine Area	\$227.18
62282	Injection Of Spinal Canal To Destroy Nerve In The Lower Spine Area	\$312.62
62284	Injection Of Dye For X-Ray Imaging And/Or Ct Of Lower Spinal Canal	\$207.57
	Aspiration Of Lower Spine Disc, Accessed Through The Skin	\$534.36
	Injection Of Dye For X-Ray Imaging Of Spine Disc, Each Level, Lumbar	\$387.11
	Injection Of Dye For X-Ray Imaging Of Spine Disc, Each Level, Cervical Or Thoracic	\$315.80
	Injection Of Chemical Enzyme Into Herniated Spinal Disc	\$533.07
	Injection Procedure, Arterial, For Occlusion Of Arteriovenous Malformation, Spinal X-Ray Of Upper Spinal Canal With Radiological Supervision And Interpretation	\$822.17 \$269.73
	X-Ray Of Middle Spinal Canal With Radiological Supervision And Interpretation	\$256.70
	X-Ray Of Lower Spinal Canal With Radiological Supervision And Interpretation	\$265.74
	X-Ray of Lower Spinal Canal With Radiological Supervision And Interpretation, Two Or More Regions	\$290.47
	Injection Of Substance Into Spinal Canal Of Upper Or Middle Back	\$155.44
62321	Injection Of Substance Into Spinal Canal Of Upper Or Middle Back Using Imaging Guidance	\$264.86
62322	Injection Of Substance Into Spinal Canal Of Lower Back Or Sacrum	\$147.01
	Injection Of Substance Into Spinal Canal Of Lower Back Or Sacrum Using Imaging Guidance	\$260.81
62324	Insertion Of Indwelling Catheter And Administration Of Substance Into Spinal Canal Of Upper Or Middle Back	\$153.41
	Insertion Of Indwelling Catheter And Administration Of Substance Into Spinal Canal Of Upper Or Middle Back Using Imaging Guidance	\$246.34
62326	Insertion Of Indwelling Catheter And Administration Of Substance Into Spinal Canal Of Lower Back	\$147.49
62327	Insertion Of Indwelling Catheter And Administration Of Substance Into Spinal Canal Of Lower Back Lower Back Using Imaging Guidance	\$239.04
62328	Diagnostic Spinal Tap Of Lower Spine Using Imaging Guidance	\$272.04
	Therapeutic Spinal Tap Of Lower Spine Using Imaging Guidance	\$334.80
	Implantation, Revision, Or Repositioning Of Spinal Canal Medication Catheter	\$402.02
	Implantation, Revision, Or Repositioning Of Catheter In Spinal Canal For Medication Administration	\$801.03
	Removal Of Previously Implanted Intrathecal Or Epidural Catheter	\$247.46
	Implantation Or Replacement Of Device For Intrathecal Or Epidural Drug Infusion; Subcutaneous Reservoir Implantation Or Replacement Of Device For Intrathecal Or Epidural Drug Infusion; Non-Programmable Pump	\$304.57
	Implantation Or Replacement Of Device For Intrathecal Or Epidural Drug Infusion; Programmable Pump, Including Preparation Of Pump, With	\$381.63
	Or Without Programming Removal Of Spinal Canal Drug Infusion Pump Or Device, Accessed Beneath The Skin	\$383.97 \$296.13
	Electronic Analysis Of Programmable, Implanted Pump For Intrathecal Or Epidural Drug Infusion (Includes Evaluation Of Reservoir Status,	
	Alarm Status, Drug Prescription Status); Without Reprogramming Or Refill Electronic Analysis Of Programmable, Implanted Pump For Intrathecal Or Epidural Drug Infusion (Includes Evaluation Of Reservoir Status,	\$30.33
62368	Alarm Status, Drug Prescription Status); With Reprogramming Electronic Analysis Of Programmable, Implanted Pump For Intrathecal Or Epidural Drug Infusion (Includes Evaluation Of Reservoir Status,	\$45.47
62369	Alarm Status, Drug Prescription Status); With Reprogramming And Refill	\$98.15
62370	Electronic Analysis Of Programmable, Implanted Pump For Intrathecal Or Epidural Drug Infusion (Includes Evaluation Of Reservoir Status, Alarm Status, Drug Prescription Status); With Reprogramming And Refill (Requiring Skill Of A Physician Or Other Qualified	\$98.65
62380	Decompression Of Spinal Cord And/Or Nerve Root In Lower Back Using Endoscope	Price By Report
	Laminectomy With Exploration And/Or Decompression Of Spinal Cord And/Or Cauda Equina, Without Facetectomy, Foraminotomy Or	4
	Diskectomy, (Eg, Spinal Stenosis), One Or Two Vertebral Segments; Cervical	\$1,189.40
	Partial Removal Of Spinal Bone With Exploration And/Or Decompression Of Spinal Cord In Upper Back Partial Removal Of Spinal Bone With Exploration And/Or Decompression Of Spinal Cord In Lower Back	\$1,072.48
	Laminectomy For Decompression Of Spinal Cord And/Or Cauda Equina, One Or Two Segments; Sacral	\$1,161.78 \$974.79
00011	Laminectomy With Removal Of Abnormal Facets And/Or Pars Inter-Articularis With Decompression Of Cauda Equina And Nerve Roots For	ψο/ 1.70
63012	Spondylolisthesis, Lumbar (Gill Type Procedure) Laminectomy With Exploration And/Or Decompression Of Spinal Cord And/Or Cauda Equina, Without Facetectomy, Foraminotomy Or	\$1,162.43
63015	Diskectomy, (Eg, Spinal Stenosis), More Than 2 Vertebral Segments; Cervical	\$1,282.70
	Partial Removal Of Bone And/Or Release Of Middle Spinal Cord Or Spinal Nerves, More Than 2 Vertebral Segments	\$1,469.29
	Partial Removal Of Bone And/Or Release Of Lower Spinal Cord Or Spinal Nerves, More Than 2 Vertebral Segments	\$1,098.58
	Herniated Intervertebral Disc; 1 Interspace, Cervical	\$1,020.05
63030	Laminotomy (Hemilaminectomy), With Decompression Of Nerve Root(S), Including Partial Facetectomy, Foraminotomy And/Or Excision Of Herniated Intervertebral Disc; 1 Interspace, Lumbar	\$957.42
	Laminotomy (Hemilaminectomy), With Decompression Of Nerve Root(S), Including Partial Facetectomy, Foraminotomy And/Or Excision Of	
	Herniated Intervertebral Disc; Each Additional Interspace, Cervical Or Lumbar (List Separately In Addition To Code For Primary	\$182.40
63040	Re-Exploration Of Spine Repair With Release Of Upper Spinal Cord Or Nerves, Single Interspace Re-Exploration Of Spine Repair With Release Of Lower Spinal Cord Or Nerves, Single Interspace	\$1,213.15 \$1,270.54
63042	Re-Exploration of Spine Repair With Release of Lower Spinal Cord of Nerves, Single Interspace Re-Exploration Of Spine Repair With Release Of Upper Spinal Cord Or Nerves, Each Additional Cervical Interspace	\$1,270.54
63043		
63043	Re-Exploration Of Spine Repair With Release Of Lower Spinal Cord Or Nerves, Each Additional Lumbar Interspace Re-Exploration Of Spine Repair With Release Of Lower Spinal Cord Or Nerves, Each Additional Lumbar Interspace Laminectomy, Facetectomy And Foraminotomy (Unilateral Or Bilateral With Decompression Of Spinal Cord, Cauda Equina And/Or Nerve	\$355.11
63043 63044	Re-Exploration Of Spine Repair With Release Of Lower Spinal Cord Or Nerves, Each Additional Lumbar Interspace	
63043 63044 63045	Re-Exploration Of Spine Repair With Release Of Lower Spinal Cord Or Nerves, Each Additional Lumbar Interspace Laminectomy, Facetectomy And Foraminotomy (Unilateral Or Bilateral With Decompression Of Spinal Cord, Cauda Equina And/Or Nerve	\$355.11
63043 63044 63045 63046	Re-Exploration Of Spine Repair With Release Of Lower Spinal Cord Or Nerves, Each Additional Lumbar Interspace Laminectomy, Facetectomy And Foraminotomy (Unilateral Or Bilateral With Decompression Of Spinal Cord, Cauda Equina And/Or Nerve Root(S), (Eg, Spinal Or Lateral Recess Stenosis), Single Vertebral Segment; Cervical	\$355.11 \$1,123.31
63043 63044 63045 63046 63047	Re-Exploration Of Spine Repair With Release Of Lower Spinal Cord Or Nerves, Each Additional Lumbar Interspace Laminectomy, Facetectomy And Foraminotomy (Unilateral Or Bilateral With Decompression Of Spinal Cord, Cauda Equina And/Or Nerve Root(S), (Eg, Spinal Or Lateral Recess Stenosis), Single Vertebral Segment; Cervical Partial Removal Of Middle Spine Bone With Release Of Spinal Cord And/Or Nerves, Mid Back (Thoracic) Area	\$355.11 \$1,123.31 \$1,077.05

Codo	Description	Foo
	Description Reconstruction Of Bone Around Spinal Canal With Release Of Spinal Cord, With Bone Reconstruction	Fee \$1,490.70
03031	Partial Removal Of Bone Of Single Segment Of Spine In Lower Back With Release Of Spinal Cord And/Or Nerves During Fusion Of Spine In	ψ1,430.70
63052	Lower Back	\$208.93
	Partial Removal Of Bone Of Additional Segment Of Spine In Lower Back With Release Of Spinal Cord And/Or Nerves During Fusion Of Spine	*
63053	In Lower Back	\$185.39
63055	Release Of Middle Spinal Cord And/Or Nerves	\$1,405.69
	Transpedicular Approach With Decompression Of Spinal Cord, Equina And/Or Nerve Root(S) (Eg, Herniated Intervertebral Disk), Single	
63056	Segment; Lumbar (Including Transfacet, Or Lateral Extraforaminal Approach) (Eg, Far Lateral Herniated Intervertebral Disk)	\$1,447.67
	Transpedicular Approach With Decompression Of Spinal Cord, Equina And/Or Nerve Root(S) (Eg, Herniated Intervertebral Disk), Single	
63057	Segment; Each Additional Segment, Thoracic Or Lumbar (List Separately In Addition To Code For Primary Procedure)	\$274.46
63064	Release Of Middle Spinal Cord Or Nerves, Costovertebral Approach, Single Segment	\$1,540.09
	Release Of Middle Spinal Cord Or Nerves, Costovertebral Approach, Each Additional Segment	\$171.49
63075	Removal Of Upper Spine Disc And Release Of Spinal Cord And/Or Nerves, Single Interspace	\$1,190.58
	Removal Of Upper Spine Disc And Release Of Spinal Cord And/Or Nerves, Each Additional Interspace	\$210.03
	Removal Of Middle Spine Disc And Release Of Spinal Cord And/Or Nerves, Single Interspace	\$1,316.09
	Removal Of Middle Spine Disc And Release Of Spinal Cord And/Or Nerves, Each Additional Interspace	\$172.58
	Removal Of Upper Spine Bone With Release Of Spinal Cord And/Or Nerves, Anterior Approach, Single Segment	\$1,533.56
	Removal Of Upper Spine Bone With Release Of Spinal Cord And/Or Nerves, Anterior Approach, Each Additional Segment	\$227.23
	Removal Of Middle Spine Bone With Release Of Spinal Cord And/Or Nerves, Transthoracic Approach, Single Segment	\$1,865.70
63086	Removal Of Middle Spine Bone With Release Of Spinal Cord And/Or Nerves, Transthoracic Approach, Each Additional Segment	\$163.93
63087	Removal Of Middle Or Lower Spine Bone With Release Of Spinal Cord Or Nerves, Combined Thoracolumbar Approach, Single Segment	\$2,096.70
	Removal Of Middle Or Lower Spine Bone With Release Of Spinal Cord Or Nerves, Combined Thoracolumbar Approach, Each Additional	
63088	Segment	\$221.18
	Removal Of Middle, Lower, Or Sacral Spine Bone With Release Of Spinal Cord Or Nerves, Transperitoneal Or Retroperitoneal Approach,	±
63090	Single Segment	\$1,722.98
	Removal Of Middle, Lower, Or Sacral Spine Bone With Release Of Spinal Cord Or Nerves, Transperitoneal Or Retroperitoneal Approach, Each	.
	Additional Segment	\$154.17
	Removal Of Middle Spine Bone With Release Of Spinal Cord And/Or Nerves, Lateral Extracavitary Approach	\$2,333.52
	Removal Of Lower Spine Bone With Release Of Spinal Cord And/Or Nerves, Lateral Extracavitary Approach	\$2,297.59
	Removal Of Middle Or Lower Spine Bone With Release Of Spinal Cord And/Or Nerves, Lateral Extracavitary Approach	\$251.17
	Laminectomy With Myelotomy (Eg, Bischof Or Drez Type), Cervical, Thoracic Or Thoracolumbar	\$1,369.81
	Laminectomy With Drainage Of Intramedullary Cyst/Syrinx; To Subarachnoid Space	\$1,213.72
	Laminectomy With Drainage Of Intramedullary Cyst/Syrinx; To Peritoneal Or Pleural Space	\$1,480.38
63185	Removal Of Spine Bone With Severing Of Nerve Roots, 1 Or 2 Segments	\$1,009.65
63190	Removal Of Spine Bone With Severing Of Nerve Roots, More Than 2 Segments	\$1,243.79
63191	Laminectomy With Section Of Spinal Accessory Nerve	\$1,190.90
63197	Removal Of Spine Bone With Incision Of Both Middle Spinal Cord Tracts	\$1,468.12
63200	Laminectomy, With Release Of Tethered Spinal Cord, Lumbar	\$1,273.69
63250	Laminectomy For Excision Or Occlusion Of Arteriovenous Malformation Of Cord; Cervical	\$2,517.35
63251	Removal Of Middle Spine Bone And Arteriovenous Malformation	\$2,575.04
63252	Removal Of Middle And Lower Spine Bone And Arteriovenous Malformation	\$2,574.39
63265	Removal Of Upper Spine Bone And Growth Other Than A Tumor Extradural	\$1,443.12
63266	Removal Of Middle Spine Bone And Growth Other Than A Tumor, Extradural	\$1,487.83
63267	Removal Of Lower Spine Bone And Growth Other Than A Tumor, Extradural	\$1,332.82
63268	Removal Of Sacral Spine Bone And Growth Other Than A Tumor, Extradural	\$1,237.10
63270	Removal Of Upper Spine Bone And Growth Other Than A Tumor, Intradural	\$1,776.74
63271	Removal Of Middle Spine Bone And Growth Other Than A Tumor, Intradural	\$1,774.98
63272	Removal Of Lower Spine Bone And Growth Other Than A Tumor, Intradural	\$1,805.51
63273	Removal Of Sacral Spine Bone And Growth Other Than A Tumor, Intradural	\$1,601.20
	Removal Or Biopsy Of Upper Spine Bone Tumor, Extradural	\$1,556.75
	Removal Or Biopsy Of Middle Spine Bone Tumor, Extradural	\$1,714.56
	Removal Or Biopsy Of Lower Spine Bone Tumor, Extradural	\$1,357.24
	Removal Or Biopsy Of Sacral Spine Bone Tumor, Extradural	\$1,372.09
	Removal Or Biopsy Of Upper Spine Bone Tumor, Intradural	\$1,815.56
	Removal Or Biopsy Of Middle Spine Bone Tumor, Intradural	\$1,797.93
	Removal Or Biopsy Of Lower Spine Bone Tumor, Intradural	\$1,698.96
	Removal Or Biopsy Of Sacral Spine Bone Tumor, Intradural	\$1,632.87
	Removal Or Biopsy Of Upper Spine Bone Tumor, Intramedullary, Intradural	\$2,227.60
	Removal Or Biopsy Of Middle Spine Bone Tumor, Intramedullary, Intradural	\$2,445.59
	Removal Or Biopsy Of Lower Spine Bone Tumor, Intramedullary, Intraductal	\$2,564.15
	Removal Or Biopsy Of Spine Bone Tumor, Combined Extradural-Intradural	\$2,373.26
00230	Osteoplastic Reconstruction Of Dorsal Spinal Elements, Following Primary Intraspinal Procedure (List Separately In Addition To Code For	ΨΖ,313.20
63295	Primary Procedure)	\$306.42
	Removal Of Upper Spine Bone Growth, Extradural	\$1,577.19
	Removal Of Middle Spine Bone Growth, Transthoracic Approach, Extradural	\$1,886.04
	Removal Of Middle Spine Bone Growth, Thoracolumbar Approach, Extradural	\$1,863.96
	Removal Of Lower Or Sacral Spine Bone Growth, Transperitoneal Or Retroperitoneal Approach, Extradural	\$1,974.46
	Removal Of Upper Spine Bone Growth, Intradural	\$2,006.12
	Removal Of Middle Spine Bone Growth, Transthoracic Approach, Intradural	\$2,006.12
	Removal Of Middle Spine Bone Growth, Transtnoracic Approach, Intradural	\$2,132.00
	Removal Of Lower Or Sacral Spine Bone Growth, Transperitoneal Or Retroperitoneal Approach, Intradural	\$2,095.59
	Internetar of Lewis Of Sacrat Spirit Botte Growth, Fransperituried Of Netroperituried Approach, Intradutal	φ∠,∪51.0/
63307		
	Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete, For Excision Of Intraspinal Lesion, Single Segment; Each Additional	¢074.05
63308	Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete, For Excision Of Intraspinal Lesion, Single Segment; Each Additional Segment (List Separately In Addition To Codes For Single Segment)	\$271.85
63308 63600	Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete, For Excision Of Intraspinal Lesion, Single Segment; Each Additional Segment (List Separately In Addition To Codes For Single Segment) Creation Of Stereotactic Spinal Cord Lesion, Accessed Through The Skin	\$941.06
63308 63600 63610	Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete, For Excision Of Intraspinal Lesion, Single Segment; Each Additional Segment (List Separately In Addition To Codes For Single Segment)	

Code	T	
	Description Characteria Treatment Of Each Additional Saine Crouth	Fee
	Stereotactic Treatment Of Each Additional Spine Growth Implantation Of Spinal Neurostimulator Electrodes, Accessed Through The Skin	\$210.64 \$1,685.08
	Laminectomy For Implantation Of Neurostimulator Electrodes, Plate/Paddle, Epidural	\$820.20
	Removal Or Revision Of Spinal Neurostimulator Electrodes, Accessed Through The Skin	\$593.20
	Removal Of Spinal Neurostimulator Electrode Plate/Paddle(S) Placed Via Laminotomy Or Laminectomy, Including Fluoroscopy, When	
63662	Performed	\$755.90
	Revision And Replacement Of Spinal Neurostimulator Electrodes, On The Skin	\$864.29
	Revision And Replacement Of Spinal Neurostimulator Electrodes, Implanted	\$776.23
	Insertion Or Replacement Of Spinal Neurostimulator Generator Or Receiver	\$363.30
	Removal Or Revision Of Spinal Neurostimulator Generator Or Receiver	\$373.26
	Repair Of Meningocele; Less Than 5 Cm Diameter	\$1,136.69
	Repair Of Meningocele; Larger Than 5 Cm Diameter Repair Of (Less Than 5 Centimeter Diameter) Spinal Cord Defect (Spina Bifida)	\$1,239.17 \$1,441.46
	Repair Of (Larger Than 5 Centimeter) Spinal Cord Defect (Spina Bifida)	\$1,509.93
	Repair Of Dural/Cerebrospinal Fluid Leak, Not Requiring Laminectomy	\$707.97
	Repair Of Spinal Fluid Leak, With Removal Of Part Of Vertebra	\$1,092.13
	Dural Graft, Spinal	\$960.93
	Creation Of Shunt, Lumbar, Subarachnoid-Peritoneal, -Pleural, Or Other; Including Laminectomy	\$858.76
	Creation Of Spinal Fluid Shunt, Accessed Through The Skin	\$662.34
63744	Replacement, Irrigation, Or Revision Of Lower Spinal Canal Shunt	\$604.38
63746	Removal Of Entire Lumbosubarachnoid Shunt System Without Replacement	\$508.94
64400	Injection Of Anesthetic Agent And/Or Steroid Into Trigeminal Nerve Of Face	\$121.67
64405	Injection Of Anesthetic Agent And/Or Steroid Into Greater Occipital Nerve Of Upper Neck And Back Of Head	\$76.41
	Injection Of Anesthetic Agent And/Or Steroid Into Vagus Nerve	\$77.45
	Injection Of Anesthetic Agent And/Or Steroid Into Brachial Nerve Bundle Of Arm	\$78.62
	Injection By Continuous Infusion Of Anesthetic Agent And/Or Steroid Into Brachial Nerve Bundle Of Arm	\$64.97
	Injection Of Anesthetic Agent And/Or Steroid Into Axillary Nerve Of Upper Arm And Shoulder	\$98.52
	Injection Of Anesthetic Agent And/Or Steroid Into Suprascapular Nerve Of Shoulder	\$84.88
	Injection Of Anesthetic Agent And/Or Steroid Into Single Intercostal Nerve Of Rib	\$71.22
	Injection Of Anesthetic Agent And/Or Steroid Into Multiple Intercostal Nerves Of Ribs For Regional Nerve Block	\$34.42
	Injection Of Anesthetic Agent And/Or Steroid Into Ilioinguinal And Iliohypogastric Nerves Of Lower Abdomen And Groin Injection Of Anesthetic Agent And/Or Steroid Into Pudendal Nerve Of External Genitals And Area Around Anus	\$88.82
	Injection of Anesthetic Agent And/or Steroid Into Paracervical Nerve Of Uterus	\$91.91 \$76.79
	Injection Of Anesthetic Agent And/Or Steroid Into Sciatic Nerve Of Lower Back And Leg	\$88.61
	Injection By Continuous Infusion Of Anesthetic Agent And/Or Steroid Into Sciatic Nerve Of Lower Back And Leg	\$59.89
	Injection Of Anesthetic Agent And/Or Steroid Into Femoral Nerve Of Thigh	\$93.43
	Injection By Continuous Infusion Of Anesthetic Agent And/Or Steroid Into Femoral Nerve Of Thigh	\$61.71
	Injection By Continuous Infusion Of Anesthetic Agent Into Lumbar Nerve Bundle Of Lower Back By Posterior Approach	\$62.80
	Injection Of Anesthetic Agent And/Or Steroid Into Other Peripheral Nerve Or Branch	\$79.99
64451	Injection Of Anesthetic Agent And/Or Steroid Into Nerves Supplying Joint Between Spine And Pelvis Using Imaging Guidance	\$221.14
64454	Injection Of Anesthetic Agent And/Or Steroid Into Genicular Nerve Branches Of Knee Using Imaging Guidance	\$223.40
	Injections Of Anesthetic And/Or Steroid Drug Into Nerve Of Foot	\$53.87
	Injection Of Anesthetic Agent, Thoracic Vertebra Through A Single Incision	\$129.14
	Injection Of Anesthetic Agent, Thoracic Vertebra Through Additional Incisions	\$68.72
	Injection Of Anesthetic Agent, Thoracic Vertebra Through A Inserted Catheter	\$228.24
64479	Injections Of Anesthetic And/Or Steroid Drug Into Upper Or Middle Spine Nerve Root Using Imaging Guidance, Single Level	\$188.41
	Injections Of Anesthetic And/Or Steroid Drug Into Upper Or Middle Spine Nerve Root Using Imaging Guidance, Each Additional Level	\$109.77
	Injections Of Anesthetic And/Or Steroid Drug Into Lower Or Sacral Spine Nerve Root Using Imaging Guidance, Single Level	\$265.84
	Injections Of Anesthetic And/Or Steroid Drug Into Lower Or Sacral Spine Nerve Root Using Imaging Guidance, Each Additional Level	\$109.77
	Injections Of Local Anesthetic For Pain Control And Abdominal Wall Analgesia On One Side	\$119.48
	Continuous Infusions Of Local Anesthetic For Pain Control And Abdominal Wall Analgesia On One Side	\$213.50
	Injections Of Local Anesthetic For Pain Control And Abdominal Wall Analgesia On Both Sides Continuous Infusions Of Local Anesthetic For Pain Control And Abdominal Wall Analgesia On Both Sides	\$148.31
	Injections Of Upper Or Middle Spine Facet Joint Using Imaging Guidance, Single Level	\$350.86 \$199.33
	Injections Of Opper Or Middle Spine Facet Joint Using Imaging Guidance, Single Level	\$100.91
	Injections Of Opper Or Middle Spine Facet Joint Using Imaging Guidance, Second Level Injections Of Upper Or Middle Spine Facet Joint Using Imaging Guidance, Third And Any Additional Level(S)	\$100.91
	Injections Of Lower Or Sacral Spine Facet Joint Using Imaging Guidance, Single Level	\$178.28
	Injections Of Lower Or Sacral Spine Facet Joint Using Imaging Guidance, Second Level	\$91.82
		\$92.99
64495	Injections Of Lower Or Sacral Spine Facet Joint Using Imaging Guidance, Third And Any Additional Level(S)	ψ32.33
	Injections Of Lower Or Sacral Spine Facet Joint Using Imaging Guidance, Third And Any Additional Level(S) Injection Of Anesthetic Agent, Trigeminal Nerve Bundle	\$96.60
64505 64510	Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle	\$96.60 \$157.27
64505 64510 64517	Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle	\$96.60 \$157.27 \$184.10
64505 64510 64517 64520	Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves	\$96.60 \$157.27 \$184.10 \$249.69
64505 64510 64517 64520 64530	Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle	\$96.60 \$157.27 \$184.10 \$249.69 \$165.92
64505 64510 64517 64520 64530 64553	Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin	\$96.60 \$157.27 \$184.10 \$249.69 \$165.92 \$2,492.70
64505 64510 64517 64520 64530 64553 64555	Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin	\$96.60 \$157.27 \$184.10 \$249.69 \$165.92 \$2,492.70 \$2,184.29
64505 64510 64517 64520 64530 64553 64555 64561	Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin Insertion Of Sacral Nerve Neurostimulator Electrodes, Accessed Through The Skin	\$96.60 \$157.27 \$184.10 \$249.69 \$165.92 \$2,492.70 \$2,184.29 \$803.03
64505 64510 64517 64520 64530 64553 64555 64561 64566	Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Addominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin Insertion Of Sacral Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Lower Leg Neurostimulator Electrode, Accessed Through The Skin	\$96.60 \$157.27 \$184.10 \$249.69 \$165.92 \$2,492.70 \$2,184.29 \$803.03 \$115.15
64505 64510 64517 64520 64530 64553 64555 64561 64566	Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin Insertion Of Sacral Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Lower Leg Neurostimulator Electrode, Accessed Through The Skin Incision For Implantation Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator	\$96.60 \$157.27 \$184.10 \$249.69 \$165.92 \$2,492.70 \$2,184.29 \$803.03
64505 64510 64517 64520 64530 64553 64555 64561 64566 64568	Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Sacral Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Lower Leg Neurostimulator Electrode, Accessed Through The Skin Incision For Implantation Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator Revision Or Replacement Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array, Including Connection To Existing Pulse	\$96.60 \$157.27 \$184.10 \$249.69 \$165.92 \$2,492.70 \$2,184.29 \$803.03 \$115.15 \$609.79
64505 64510 64517 64520 64530 64553 64561 64566 64568	Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Sacral Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Lower Leg Neurostimulator Electrode, Accessed Through The Skin Incision For Implantation Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator Revision Or Replacement Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array, Including Connection To Existing Pulse Generator	\$96.60 \$157.27 \$184.10 \$249.69 \$165.92 \$2,492.70 \$2,184.29 \$803.03 \$115.15 \$609.79
64505 64510 64517 64520 64530 64553 64561 64566 64568 64569 64570	Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin Insertion Of Sacral Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Lower Leg Neurostimulator Electrode, Accessed Through The Skin Incision For Implantation Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator Revision Or Replacement Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array, Including Connection To Existing Pulse Generator Removal Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator	\$96.60 \$157.27 \$184.10 \$249.69 \$165.92 \$2,492.70 \$2,184.29 \$803.03 \$115.15 \$609.79
64505 64510 64517 64520 64530 64553 64555 64561 64568 64568 64569 64570 64575	Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Sacral Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Lower Leg Neurostimulator Electrode, Accessed Through The Skin Incision For Implantation Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator Revision Or Replacement Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array, Including Connection To Existing Pulse Generator	\$96.60 \$157.27 \$184.10 \$249.69 \$165.92 \$2,492.70 \$2,184.29 \$803.03 \$115.15 \$609.79
64505 64510 64517 64520 64530 64553 64555 64561 64566 64568 64570 64575 64580	Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin Insertion Of Sacral Nerve Neurostimulator Electrode, Accessed Through The Skin Implantation Of Lower Leg Neurostimulator Electrode, Accessed Through The Skin Incision For Implantation Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator Revision Or Replacement Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array, Including Connection To Existing Pulse Generator Removal Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator Incision For Implantation Of Neurostimulator Electrode Array; Peripheral Nerve (Excludes Sacral Nerve)	\$96.60 \$157.27 \$184.10 \$249.69 \$165.92 \$2,492.70 \$2,184.29 \$803.03 \$115.15 \$609.79 \$674.77 \$713.33

Codo	Description	Foo
Code	Description Revision Or Replacement Of Hypoglossal Nerve Neurostimulator Electrode And Breathing Sensor Electrode With Connection To Existing	Fee
64583	Generator Canada	\$747.62
	Removal Of Hypoglossal Nerve Neurostimulator Electrode And Generator And Breathing Sensor Electrode	\$631.48
64585	Revision Of Peripheral Neurostimulator Electrodes	\$215.49
	Revision Of Peripheral Neurostimulator Electrodes	\$184.14
	Insertion Or Replacement Of Peripheral, Sacral, Or Gastric Neurostimulator Generator Or Receiver	\$163.00
	Removal Or Revision Of A Peripheral, Sacral, Or Gastric Neurostimulator Pulse Generator Or Receiver	Price By Report
	Insertion Or Replacement Of A Peripheral Integrated Neurostimulator Each Additional Electrode Array	Price By Report
	Revision Or Removal Of A Electrode Array With An Integrated Neurostimulator	Price By Report
	Destruction Of The First Division Of The Trigeminal (Facial) Nerve Branch Destruction Of The Second And Third Division Of The Trigeminal (Facial) Nerve Branch	\$441.24 \$607.74
04003	Destruction of the decord And Third Division of the Higelinian (Lacial) Notice Didnot	ψ007.74
64610	Destruction By Neurolytic Agent, Trigeminal Nerve Second And Third Division Branches At Foramen Ovale Under Radiologic Monitoring	\$735.77
	Chemodenervation Of Parotid And Submandibular Salivary Glands, Bilateral	\$136.73
64612	Chemodenervation Of Muscle(S); Muscle(S) Innervated By Facial Nerve, Unilateral (Eg, For Blepharospasm, Hemifacial Spasm)	\$139.80
	Chemodenervation Of Muscle(S); Muscle(S) Innervated By Facial, Trigeminal, Cervical Spinal And Accessory Nerves, Bilateral (Eg, For Chronic	
	Migraine)	\$152.54
	Injection Of Chemical For Destruction Of Nerve Muscles On One Side Of Neck Excluding Voice Box Accessed Through The Skin	\$90.50
	Injection Of Chemical For Destruction Of Nerve Muscles On One Side Of Voice Box Accessed Through The Skin Destruction By Neurolytic Agent Intercostal Nerve	\$152.94 \$143.52
	Destruction Of Genicular Nerve Branches Of Knee By Injection Using Imaging Guidance	\$428.76
	Radiofrequency Destruction Of Nerves Supplying Joint Between Spine And Pelvis Using Imaging Guidance	\$523.04
	Heat Destruction Of Intraosseous Basivertebral Nerve In Bones Of Spine In Lower Back, First Two Bones	\$384.27
	Heat Destruction Of Intraosseous Basivertebral Nerve In Additional Bone Of Spine In Lower Back	\$176.27
64630	Destruction By Neurolytic Agent; Pudendal Nerve	\$242.25
64632	Destruction By Neurolytic Agent; Plantar Common Digital Nerve	\$84.85
	Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluoroscopy Or Ct); Cervical Or Thoracic, Single	
64633	Facet Joint	\$473.99
	Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluoroscopy Or Ct); Cervical Or Thoracic, Each	*
64634	Additional Facet Joint (List Separately In Addition To Code For Primary Procedure)	\$235.43
64625	Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluoroscopy Or Ct); Lumbar Or Sacral, Single Facet Joint	\$503.02
04033	Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluoroscopy Or Ct); Lumbar Or Sacral, Each	φ503.02
64636	Additional Facet Joint (List Separately In Addition To Code For Primary Procedure)	\$212.07
	Destruction By Neurolytic Agent Other Peripheral Nerve Or Branch	\$175.06
	Injection Of Chemical For Destruction Of Nerve Muscles On One Arm Or Leg, 1-4 Muscles	\$115.15
64643	Injection Of Chemical For Destruction Of Nerve Muscles On Arm Or Leg, 1-4 Muscles, Each Additional Extremity	\$75.33
	Injection Of Chemical For Destruction Of Nerve Muscles On One Arm Or Leg, 5 Or More Muscles	\$132.05
	Injection Of Chemical For Destruction Of Nerve Muscles On Arm Or Leg, 5 Or More Muscles, Each Additional Extremity	\$92.45
	Injection Of Chemical For Destruction Of Nerve Muscles On Trunk, 5 Or More Muscles	\$123.95
	Injection Of Chemical For Destruction Of Nerve Muscles On Trunk, 6 Or More Muscles	\$164.42
	Chemodenervation Of Eccrine Glands; Both Axillae Chemodenervation Of Eccrine Glands; Other Area(S) (Eg, Scalp, Face, Neck), Per Day	\$70.56 \$83.78
	Destruction By Neurolytic Agent, With Or Without Radiologic Monitoring; Celiac Plexus	\$312.44
	Destruction By Neurolytic Agent, With Or Without Radiologic Monitoring; Superior Hypogastric Plexus	\$456.58
	Neurolysis; Digital, One Or Both, Same Digit	\$350.77
64704	Neurolysis; Nerve Of Hand Or Foot	\$301.33
64708	Release Of Nerve Of Arm Or Leg, Open Procedure	\$514.98
	Release Of Sciatic Nerve, Open Procedure	\$603.40
	Release Of Major Nerve Of Arm Or Leg, Open Procedure	\$713.08
	Release Of Nerve Of Upper Leg, Open Procedure	\$685.61
	Neurolysis And/Or Transposition; Cranial Nerve (Specify)	\$472.84
	Neurolysis And/Or Transposition; Ulnar Nerve At Elbow	\$557.92
	Neurolysis And/Or Transposition; Ulnar Nerve At Wrist Neurolysis And/Or Transposition; Median Nerve At Carpal Tunnel	\$417.86 \$456.88
	Decompression; Unspecified Nerve(S) (Specify)	\$456.88 \$365.31
	Decompression; Plantar Digital Nerve	\$250.79
	Internal Neurolysis By Dissection, With Or Without Microdissection (List Separately In Addition To Code For Primary Neuroplasty)	\$161.79
	Transection Or Avulsion Of; Supraorbital Nerve	\$402.10
	Transection Or Avulsion Of; Infraorbital Nerve	\$453.67
	Transection Or Avulsion Of; Mental Nerve	\$307.83
	Transection Or Avulsion Of; Inferior Alveolar Nerve By Osteotomy	\$421.16
64740	Transporting On Applican Of Lineary Name	\$431.95
	Transection Or Avulsion Of; Lingual Nerve	
64742	Transection Or Avulsion Of; Facial Nerve, Differential Or Complete	
64742 64744	Transection Or Avulsion Of; Facial Nerve, Differential Or Complete Transection Or Avulsion Of; Greater Occipital Nerve	\$445.96
64742 64744	Transection Or Avulsion Of; Facial Nerve, Differential Or Complete Transection Or Avulsion Of; Greater Occipital Nerve Transection Or Avulsion Of; Phrenic Nerve	\$459.06 \$445.96 \$386.81
64742 64744 64746	Transection Or Avulsion Of; Facial Nerve, Differential Or Complete Transection Or Avulsion Of; Greater Occipital Nerve Transection Or Avulsion Of; Phrenic Nerve Transection Or Avulsion Of; Vagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal	\$445.96 \$386.81
64742 64744 64746 64755	Transection Or Avulsion Of; Facial Nerve, Differential Or Complete Transection Or Avulsion Of; Greater Occipital Nerve Transection Or Avulsion Of; Phrenic Nerve Transection Or Avulsion Of; Vagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal Cell Vagotomy, Supra- Or Highly Selective Vagotomy)	\$445.96 \$386.81 \$820.14
64742 64744 64746 64755 64760	Transection Or Avulsion Of; Facial Nerve, Differential Or Complete Transection Or Avulsion Of; Greater Occipital Nerve Transection Or Avulsion Of; Phrenic Nerve Transection Or Avulsion Of; Vagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal Cell Vagotomy, Supra- Or Highly Selective Vagotomy) Transection Or Avulsion Of; Vagus Nerve (Vagotomy), Abdominal	\$445.96 \$386.81 \$820.14 \$469.28
64742 64744 64746 64755 64760 64763	Transection Or Avulsion Of; Facial Nerve, Differential Or Complete Transection Or Avulsion Of; Greater Occipital Nerve Transection Or Avulsion Of; Phrenic Nerve Transection Or Avulsion Of; Vagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal Cell Vagotomy, Supra- Or Highly Selective Vagotomy)	\$445.96 \$386.81 \$820.14 \$469.28 \$464.14
64742 64744 64746 64755 64760 64763	Transection Or Avulsion Of; Facial Nerve, Differential Or Complete Transection Or Avulsion Of; Greater Occipital Nerve Transection Or Avulsion Of; Phrenic Nerve Transection Or Avulsion Of; Vagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal Cell Vagotomy, Supra- Or Highly Selective Vagotomy) Transection Or Avulsion Of; Vagus Nerve (Vagotomy), Abdominal Incision Or Removal Of Nerve (Obturator) Outside Of The Pelvis That Control The Muscles That Pull The Thighs Together	\$445.96 \$386.81 \$820.14 \$469.28 \$464.14 \$572.17
64742 64744 64746 64755 64760 64766 64771	Transection Or Avulsion Of; Facial Nerve, Differential Or Complete Transection Or Avulsion Of; Greater Occipital Nerve Transection Or Avulsion Of; Phrenic Nerve Transection Or Avulsion Of; Phrenic Nerve Transection Or Avulsion Of; Vagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal Cell Vagotomy, Supra- Or Highly Selective Vagotomy) Transection Or Avulsion Of; Vagus Nerve (Vagotomy), Abdominal Incision Or Removal Of Nerve (Obturator) Outside Of The Pelvis That Control The Muscles That Pull The Thighs Together Incision Or Removal Of Nerve (Obturator) Inside Of The Pelvis That Control The Muscles That Pull The Thighs Together	\$445.96 \$386.81 \$820.14 \$469.28 \$464.14 \$572.17 \$531.50
64742 64744 64746 64755 64760 64766 64771 64772	Transection Or Avulsion Of; Facial Nerve, Differential Or Complete Transection Or Avulsion Of; Greater Occipital Nerve Transection Or Avulsion Of; Phrenic Nerve Transection Or Avulsion Of; Vagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal Cell Vagotomy, Supra- Or Highly Selective Vagotomy) Transection Or Avulsion Of; Vagus Nerve (Vagotomy), Abdominal Incision Or Removal Of Nerve (Obturator) Outside Of The Pelvis That Control The Muscles That Pull The Thighs Together Incision Or Removal Of Nerve (Obturator) Inside Of The Pelvis That Control The Muscles That Pull The Thighs Together Transection Or Avulsion Of Other Cranial Nerve, Extradural	\$445.96
64742 64744 64746 64755 64760 64763 64766 64771 64772 64774	Transection Or Avulsion Of; Facial Nerve, Differential Or Complete Transection Or Avulsion Of; Greater Occipital Nerve Transection Or Avulsion Of; Phrenic Nerve Transection Or Avulsion Of; Vagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal Cell Vagotomy, Supra- Or Highly Selective Vagotomy) Transection Or Avulsion Of; Vagus Nerve (Vagotomy), Abdominal Incision Or Removal Of Nerve (Obturator) Outside Of The Pelvis That Control The Muscles That Pull The Thighs Together Incision Or Removal Of Nerve (Obturator) Inside Of The Pelvis That Control The Muscles That Pull The Thighs Together Transection Or Avulsion Of Other Cranial Nerve, Extradural Transection Or Avulsion Of Other Spinal Nerve, Extradural Excision Of Neuroma; Cutaneous Nerve, Surgically Identifiable Removal Of Growth Of Finger Or Toe Nerve, Same Digit	\$445.96 \$386.81 \$820.14 \$469.28 \$464.14 \$572.17 \$531.50 \$582.73 \$382.98
64742 64744 64746 64755 64760 64763 64766 64771 64772 64774 64776	Transection Or Avulsion Of; Facial Nerve, Differential Or Complete Transection Or Avulsion Of; Greater Occipital Nerve Transection Or Avulsion Of; Phrenic Nerve Transection Or Avulsion Of; Yagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal Cell Vagotomy, Supra- Or Highly Selective Vagotomy), Abdominal Incision Or Avulsion Of; Vagus Nerve (Vagotomy), Abdominal Incision Or Removal Of Nerve (Obturator) Outside Of The Pelvis That Control The Muscles That Pull The Thighs Together Incision Or Removal Of Nerve (Obturator) Inside Of The Pelvis That Control The Muscles That Pull The Thighs Together Transection Or Avulsion Of Other Cranial Nerve, Extradural Transection Or Avulsion Of Other Spinal Nerve, Extradural Excision Of Neuroma; Cutaneous Nerve, Surgically Identifiable	\$445.96 \$386.81 \$820.14 \$469.28 \$464.14 \$572.17 \$531.50 \$582.73 \$382.98

Code	Description	Fee
	Description Removal Of Growth Of Hand Or Foot Nerve, Each Additional Nerve	\$191.55
	Excision Of Neuroma; Major Peripheral Nerve, Except Sciatic	\$662.80
	Excision Of Neuroma; Sciatic Nerve	\$896.14
64787	Insertion Of Plastic Cap On Nerve End	\$213.65
	Excision Of Neurofibroma Or Neurolemmoma; Cutaneous Nerve	\$350.91
	Removal Of Growth Of Peripheral Nerve Or Nerve Lining, Major	\$768.01
	Removal Of Growth Of Peripheral Nerve Or Nerve Lining, Extensive Including Malignancy Biopsy Of Nerve	\$954.32
	Sympathectomy, Cervical	\$186.77 \$739.66
	Sympathectomy, Cervicothoracic	\$1,031.78
	Sympathectomy, Thoracolumbar	\$941.52
64818	Sympathectomy, Lumbar	\$705.68
	Sympathectomy; Digital Arteries, Each Digit	\$667.39
	Sympathectomy; Radial Artery	\$633.77
	Sympathectomy; Ulnar Artery	\$638.14
	Sympathectomy; Superficial Palmar Arch Suture Of One Hand Or Foot Digital Nerve	\$721.12 \$466.60
	Suture Of Each Additional Digital Hand Or Foot Digital Nerve	\$223.03
	Suture Of One Nerve; Hand Or Foot, Common Sensory Nerve	\$634.86
64835	Suture Of One Nerve; Median Motor Thenar	\$741.13
64836	Suture Of One Nerve; Ulnar Motor	\$741.13
	Suture Of Each Additional Nerve, Hand Or Foot (List Separately In Addition To Code For Primary Procedure)	\$322.70
	Suture Of Posterior Tibial Nerve	\$871.73
	Suture Of Peripheral Nerve, Arm Or Leg, With Relocation To New Site Suture Of Peripheral Nerve, Arm Or Leg	\$895.52 \$974.45
	Suture Of Sciatic Nerve	\$974.45 \$1,059.80
	Suture Of Each Additional Major Peripheral Nerve (List Separately In Addition To Code For Primary Procedure)	\$219.40
	Suture Of; Brachial Plexus	\$1,310.06
	Suture Of; Lumbar Plexus	\$1,236.04
	Suture Of Facial Nerve; Extracranial	\$782.85
	Suture Of Facial Nerve; Intratemporal, With Or Without Grafting	\$1,005.98
	Connection Of Nerves To Restore Function To The Face (Facial-Spinal) Connection Of Nerves To Restore Function To The Face (Facial-Hypoglossal)	\$1,144.66 \$922.52
	Suture Of Nerve; Requiring Secondary Or Delayed Suture (List Separately In Addition To Code For Primary Neurorrhaphy)	\$102.65
0.012		ψ102.00
64874	Suture Of Nerve; Requiring Extensive Proximal Mobilization, Or Transposition Of Nerve (List Separately In Addition To Code For Nerve Suture)	\$153.76
	Suture Of Nerve; Requiring Shortening Of Bone Of Extremity (List Separately In Addition To Code For Nerve Suture)	\$173.74
	Graft Of Head Or Neck Nerve, 4.0 Cm Or Less	\$1,008.44
	Nerve Graft (Includes Obtaining Graft), Head Or Neck; More Than 4 Cm In Length Graft Of Hand Or Foot Nerve, 4.0 Cm Or Less	\$1,174.41 \$974.41
	Graft Of Fland Or Foot Nerve, More Than 4.0 Cm	\$1,035.45
	Graft Of Arm Or Leg Nerve, 4.0 Cm Or Less	\$948.19
	Graft Of Arm Or Leg Nerve, More Than 4.0 Cm	\$1,010.45
	Graft Of Multiple Hand Or Foot Nerves, 4.0 Cm Or Less	\$1,192.82
	Graft Of Multiple Hand Or Foot Nerves, More Than 4.0 Cm	\$1,285.06
	Graft Of Multiple Arm Or Leg Nerves, 4.0 Cm Or Less Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm	\$1,286.44
	Placement Of Nerve For Grafting, Single Strand	\$1,233.74 \$526.59
	Nerve Graft, Each Additional Nerve; Multiple Strands (Cable) (List Separately In Addition To Code For Primary Procedure)	\$609.80
	Transfer Of Nerve To Injured Nerve, First Stage	\$913.24
64907	Transfer Of Nerve To Injured Nerve, Second Stage	\$1,169.88
	Nerve Repair; With Synthetic Conduit Or Vein Allograft (Eg, Nerve Tube), Each Nerve	\$721.07
	Nerve Repair; With Autogenous Vein Graft (Includes Harvest Of Vein Graft), Each Nerve	\$931.15
	Repair Of Nerve Using Nerve Graft, First Strand Repair Of Nerve Using Nerve Graft, Each Additional Strand	\$800.95 \$157.01
	Unlisted Procedure, Nervous System	Price By Report
	- ···· · ···· - · · · · · · · · · · · ·	by Report
	Removal Of Eye Contents, Without Bone	\$712.74
	Removal Of Eye Contents, Without Bone Evisceration Ocular Contents; With Implant	\$712.74 \$661.82
65093 65101	Evisceration Ocular Contents; With Implant Enucleation Eye; Without Implant	\$661.82 \$812.74
65093 65101 65103	Evisceration Ocular Contents; With Implant Enucleation Eye; Without Implant Enucleation Eye; With Implant, Muscles Not Attached To Implant	\$661.82 \$812.74 \$797.59
65093 65101 65103 65105	Evisceration Ocular Contents; With Implant Enucleation Eye; Without Implant Enucleation Eye; With Implant, Muscles Not Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant	\$661.82 \$812.74 \$797.59 \$909.05
65093 65101 65103 65105 65110	Evisceration Ocular Contents; With Implant Enucleation Eye; Without Implant Enucleation Eye; With Implant, Muscles Not Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Removal Of Eye Contents, With Bone	\$661.82 \$812.74 \$797.59 \$909.05 \$1,246.51
65093 65101 65103 65105 65110	Evisceration Ocular Contents; With Implant Enucleation Eye; Without Implant Enucleation Eye; With Implant, Muscles Not Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant	\$661.82 \$812.74 \$797.59 \$909.05 \$1,246.51 \$1,424.51
65093 65101 65103 65105 65110	Evisceration Ocular Contents; With Implant Enucleation Eye; Without Implant Enucleation Eye; With Implant, Muscles Not Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Removal Of Eye Contents, With Bone Exenteration Orbit(Does Not Include Skin Graft), Removal Orbital Contents; With Therapeutic Removal Of Bone	\$661.82 \$812.74 \$797.59 \$909.05 \$1,246.51
65093 65101 65103 65105 65110 65112 65114	Evisceration Ocular Contents; With Implant Enucleation Eye; Without Implant Enucleation Eye; With Implant, Muscles Not Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Removal Of Eye Contents, With Bone Exenteration Orbit(Does Not Include Skin Graft), Removal Orbital Contents; With Therapeutic Removal Of Bone Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate Procedure)	\$661.82 \$812.74 \$797.59 \$909.05 \$1,246.51 \$1,424.51 \$1,486.15
65093 65101 65103 65105 65110 65112 65114 65125 65130	Evisceration Ocular Contents; With Implant Enucleation Eye; Without Implant Enucleation Eye; With Implant, Muscles Not Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Removal Of Eye Contents, With Bone Exenteration Orbit(Does Not Include Skin Graft), Removal Orbital Contents; With Therapeutic Removal Of Bone Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate Procedure) Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell	\$661.82 \$812.74 \$797.59 \$909.05 \$1,246.51 \$1,424.51 \$1,486.15 \$436.15
65093 65101 65103 65105 65110 65112 65114 65125 65130 65135	Evisceration Ocular Contents; With Implant Enucleation Eye; Without Implant Enucleation Eye; With Implant, Muscles Not Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Removal Of Eye Contents, With Bone Exenteration Orbit(Does Not Include Skin Graft), Removal Orbital Contents; With Therapeutic Removal Of Bone Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate Procedure) Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell Insertion Of Permanent Ocular Prosthesis Into Orbit, After Nucleation, Muscles Not Attached To Implant	\$661.82 \$812.74 \$797.59 \$909.05 \$1,246.51 \$1,424.51 \$1,486.15 \$436.15 \$815.14 \$824.62
65093 65101 65103 65105 65110 65112 65114 65125 65130 65135	Evisceration Ocular Contents; With Implant Enucleation Eye; Without Implant Enucleation Eye; With Implant, Muscles Not Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Removal Of Eye Contents, With Bone Exenteration Orbit(Does Not Include Skin Graft), Removal Orbital Contents; With Therapeutic Removal Of Bone Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate Procedure) Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell Insertion Of Dermanent Ocular Prosthesis Into Orbit, After Nucleation, Muscles Not Attached To Implant Insertion Ocular Implant Secondary; After Enucleation, Muscles Attached To Implant	\$661.82 \$812.74 \$797.59 \$909.05 \$1,246.51 \$1,424.51 \$1,486.15 \$436.15 \$815.14 \$824.62 \$884.72
65093 65101 65103 65105 65110 65112 65114 65125 65130 65135 65140 65150	Evisceration Ocular Contents; With Implant Enucleation Eye; Without Implant Enucleation Eye; With Implant, Muscles Not Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Removal Of Eye Contents, With Bone Exenteration Orbit(Does Not Include Skin Graft), Removal Orbital Contents; With Therapeutic Removal Of Bone Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate Procedure) Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell Insertion Of Permanent Ocular Prosthesis Into Orbit, After Nucleation, Muscles Not Attached To Implant	\$661.82 \$812.74 \$797.59 \$909.05 \$1,246.51 \$1,424.51 \$1,486.15 \$436.15 \$815.14 \$824.62 \$884.72
65093 65101 65103 65105 65110 65112 65114 65125 65130 65135 65140 65155	Evisceration Ocular Contents; With Implant Enucleation Eye; Without Implant Enucleation Eye; With Implant, Muscles Not Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Removal Of Eye Contents, With Bone Exenteration Orbit(Does Not Include Skin Graft), Removal Orbital Contents; With Therapeutic Removal Of Bone Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate Procedure) Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell Insertion Of Permanent Ocular Prosthesis Into Orbit, After Nucleation, Muscles Not Attached To Implant Insertion Ocular Implant Secondary; After Enucleation, Muscles Attached To Implant Reinsertion Of Ocular Implant With Or Without Graft From The Outer Eye	\$661.82 \$812.74 \$797.59 \$909.05 \$1,246.51 \$1,424.51 \$1,486.15 \$436.15 \$815.14 \$824.62 \$884.72
65093 65101 65103 65105 65110 65112 65114 65125 65130 65135 65140 65150 65150 65155 65205	Evisceration Ocular Contents; With Implant Enucleation Eye; Without Implant Enucleation Eye; With Implant, Muscles Not Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Removal Of Eye Contents, With Bone Exenteration Orbit (Does Not Include Skin Graft), Removal Orbital Contents; With Therapeutic Removal Of Bone Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate Procedure) Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, Muscles Not Attached To Implant Insertion Ocular Implant Secondary; After Enucleation, Muscles Attached To Implant Reinsertion Of Ocular Implant With Or Without Graft From The Outer Eye Reinsertion Of Ocular Implant With Foreign Material Removal Ocular Implant Removal Of Foreign Body In External Eye, Conjunctiva	\$661.82 \$812.74 \$797.59 \$909.05 \$1,246.51 \$1,424.51 \$1,486.15 \$436.15 \$436.15 \$824.62 \$884.72 \$674.12 \$918.53 \$746.21
65093 65101 65103 65105 65110 65112 65114 65125 65130 65135 65140 65155 65155 65175 65205	Evisceration Ocular Contents; With Implant Enucleation Eye; Without Implant Enucleation Eye; With Implant, Muscles Not Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Removal Of Eye Contents, With Bone Exenteration Orbit(Does Not Include Skin Graft), Removal Orbital Contents; With Therapeutic Removal Of Bone Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate Procedure) Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell Insertion Of Permanent Ocular Prosthesis Into Orbit, After Nucleation, Muscles Not Attached To Implant Insertion Ocular Implant Secondary, After Enucleation, Muscles Attached To Implant Reinsertion Of Ocular Implant With Or Without Graft From The Outer Eye Reinsertion Of Ocular Implant With Foreign Material Removal Ocular Implant Removal Of Foreign Body In External Eye, Conjunctiva Removal Of Foreign Body In External Eye, Conjunctiva Or Sclera	\$661.82 \$812.74 \$797.59 \$909.05 \$1,246.51 \$1,424.51 \$1,486.15 \$436.15 \$815.14 \$824.62 \$884.72 \$674.12 \$918.53 \$746.21 \$29.94
65093 65101 65103 65105 65110 65112 65114 65125 65130 65135 65140 65150 65155 65205 65200	Evisceration Ocular Contents; With Implant Enucleation Eye; Without Implant Enucleation Eye; With Implant, Muscles Not Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Removal Of Eye Contents, With Bone Exenteration Orbit(Does Not Include Skin Graft), Removal Orbital Contents; With Therapeutic Removal Of Bone Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate Procedure) Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell Insertion Of Permanent Ocular Prosthesis Into Orbit, After Nucleation, Muscles Not Attached To Implant Insertion Of Ocular Implant Secondary; After Enucleation, Muscles Attached To Implant Reinsertion Of Ocular Implant With Foreign Material Removal Ocular Implant With Foreign Material Removal Ocular Implant Removal Of Foreign Body In External Eye, Conjunctiva Removal Of Foreign Body In External Eye, Conjunctiva Or Sclera Removal Of Foreign Body, External Eye, Cornea	\$661.82 \$812.74 \$797.59 \$909.05 \$1,246.51 \$1,424.51 \$1,486.15 \$436.15 \$815.14 \$824.62 \$884.72 \$674.12 \$918.53 \$746.21 \$29.94 \$40.48
65093 65101 65103 65105 65110 65112 65114 65125 65130 65135 65140 65155 65175 65175 6520 65220	Evisceration Ocular Contents; With Implant Enucleation Eye; Without Implant Enucleation Eye; With Implant, Muscles Not Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Enucleation Eye; With Implant, Muscles Attached To Implant Removal Of Eye Contents, With Bone Exenteration Orbit(Does Not Include Skin Graft), Removal Orbital Contents; With Therapeutic Removal Of Bone Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate Procedure) Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell Insertion Of Permanent Ocular Prosthesis Into Orbit, After Nucleation, Muscles Not Attached To Implant Insertion Ocular Implant Secondary, After Enucleation, Muscles Attached To Implant Reinsertion Of Ocular Implant With Or Without Graft From The Outer Eye Reinsertion Of Ocular Implant With Foreign Material Removal Ocular Implant Removal Of Foreign Body In External Eye, Conjunctiva Removal Of Foreign Body In External Eye, Conjunctiva Or Sclera	\$661.82 \$812.74 \$797.59 \$909.05 \$1,246.51 \$1,424.51 \$1,426.15 \$436.15 \$815.14 \$824.62 \$884.72 \$674.12 \$918.53 \$746.21 \$29.94

Code	Description	Fee
	Removal Of Foreign Body From Inside Eye With A Magnet	\$914.15
65265	Removal Of Foreign Body From Inside Eye Without A Magnet	\$903.54
	Repair Laceration; Conjunctiva, With Or Without Nonperforating Laceration Sclera, Direct Closure	\$201.41
	Repair Laceration; Conjunctiva, By Mobilization And Rearrangement, Without Hospitalization	\$503.35
	Repair Of Lacerated Conjunctiva Using Flap Or Graft, Requiring Hospitalization	\$351.84
	Repair Laceration; Cornea, Nonperforating, With Or Without Removal Foreign Body Repair Of Perforating Laceration Of Cornea And/Or Sclera Not Involving Uveal Tissue	\$554.43 \$620.47
	Repair Of Perforating Laceration Of Cornea And/Or Sclera Not Involving Overal Tissue	\$992.75
	Repair Of Laceration Application Of Tissue Glue, Wounds Of Cornea And/Or Sclera	\$663.12
	Repair Of Injured Eye Muscle Or Tendon	\$453.71
65400	Excision Lesion Cornea (Keratectomy, Lamellar, Partial), Except Pterygium	\$491.79
	Biopsy Cornea	\$134.35
	Removal Or Relocation Of Corneal Conjunctiva, Without Graft	\$514.03
	Removal Or Relocation Of Corneal Conjunctiva, With Graft	\$715.84
	Scraping Cornea, Diagnostic, For Smear And/Or Culture	\$78.62
	Removal Of Outer Layer Of Cornea, Chemical Cauterization Removal Of Outer Layer Of Cornea, Chelating Agent	\$71.30 \$360.00
	Destruction Of Lesion Of Cornea By Cryotherapy, Photocoagulation Or Thermocauterization	\$306.33
	Multiple Punctures Of Anterior Cornea (Eg, For Corneal Erosion, Tattoo)	\$414.06
	Transplantation Of Tissue From One Cornea To Other Cornea, Anterior Lamellar	\$1,062.89
	Transplantation Of Tissue From One Cornea To Other Cornea, Penetrating (Except In Aphakia Or Pseudophakia)	\$1,293.12
65750	Transplantation Of Tissue From One Cornea To Other Cornea, Penetrating (In Aphakia)	\$1,172.65
	Transplantation Of Tissue From One Cornea To Other Cornea, Penetrating (In Pseudophakia)	\$1,167.09
65756	Keratoplasty (Corneal Transplant); Endothelial	\$1,086.32
05757	Poolshoogh Propagation Of Corpool Endetholial Allograft Prior To Transplantation // int Consertable Addition To Code For Private Providence	#040 =0
	Backbench Preparation Of Corneal Endothelial Allograft Prior To Transplantation (List Separately In Addition To Code For Primary Procedure) Corneal Relaxing Incision For Correction Of Surgically Induced Astigmatism	\$210.53
	Corneal Wedge Resection For Correction Of Surgically Induced Astigmatism	\$427.28 \$534.93
	Insertion Of Amniotic Membrane To Eve Surface	\$1,482.08
	Insertion Of Amniotic Membrane To Eye Surface With Sutures	\$1,152.76
65780	Ocular Surface Reconstruction; Amniotic Membrane Transplantation, Multiple Layers	\$620.63
	Ocular Surface Reconstruction; limbal Stem Cell Allograft (Eg, Cadaveric Or Living Donor)	\$1,225.25
	Ocular Surface Reconstruction; Limbal Conjunctival Autograft (Includes Obtaining Graft)	\$1,058.57
	Implantation Of Corneal Ring Segments	\$2,141.45
	Aspiration Of Eye Fluid, Simple	\$123.48
	Aspiration Of Eye Fluid, Complex Paracentesis Anterior Chamber Eye (Separate Procedure); With Removal Of Blood, With Or Without Irrigation And/Or Air Injection	\$429.69 \$573.37
	Goniotomy	\$697.74
	Trabeculotomy Ab Externo	\$782.22
	Laser Repair 70 Improve Eye Fluid Flow, 1 Or More Sessions	\$255.44
65860	Severing Adhesions Of Anterior Segment, Laser Technique (Separate Procedure)	\$287.58
	Removal Of Scar Tissue In Eye, Goniosynechiae	\$445.05
	Removal Of Scar Tissue In Eye, Anterior Synechiae, Except Goniosynechiae	\$552.93
	Removal Of Scar Tissue In Eye, Posterior Synechiae	\$507.26
	Severing Adhesions Anterior Segment Eye (With Or Without Injection Air Or Liquid) (Separate Procedure); Corneovitreal Adhesions	\$619.25
	Removal Of Epithelial Downgrowth, Anterior Chamber Of Eye	\$923.96
	Removal Of Implanted Material, Anterior Segment Of Eye Removal Of Blood Clot, Anterior Segment Of Eye	\$735.07 \$596.03
	Injection, Anterior Chamber Of Eye (Separate Procedure); Air Or Liquid	\$181.02
	Injection, Anterior Chamber (Separate Procedure); Medication	\$169.55
	Excision Lesion Sclera	\$666.10
66150	Treatment For Glaucoma By Creating A Hole For Drainage And Excision Of Part Of The Iris	\$814.76
	Treatment For Glaucoma With Cautery And Excision Of Part Of The Iris	\$814.44
	Fistulization Sclera For Glaucoma; Sclerectomy With Punch Or Scissors, With Iridectomy	\$914.69
	Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary	\$1,012.85
	Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Secondary Transluminal Dilation Of Aqueous Outflow Canal; Without Retention Of Device Or Stent	\$1,106.09
	Transluminal Dilation Of Aqueous Outflow Canal; With Retention Of Device Or Stent Transluminal Dilation Of Aqueous Outflow Canal; With Retention Of Device Or Stent	\$784.80 \$739.52
	Creation Of Shunt To Improve Eye Fluid Flow	\$1,000.74
	Creation Of Shunt To Improve Eye Fluid Flow With Graft	\$1,206.19
	Insertion Of Eye Fluid Drainage Device, External Approach	\$953.31
	Revision Of Shunt To Improve Eye Fluid Flow	\$734.29
	Revision Of Eye Fluid Drainage Shunt With Graft	\$719.04
	Repair Of Protrusion Of Inner Tissue Through Eyeball With Graft	\$865.97
	Follow-Up Surgery Of Eyeball	\$670.98
	Iridotomy By Stab Incision (Separate Procedure); Except Transfixion Iridotomy By Stab Incision (Separate Procedure); With Transfixion As For Iris Bombe	\$373.49 \$405.66
	Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion	\$405.66 \$853.45
	Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body	\$1,015.70
	Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris	\$441.44
	Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris	\$524.37
	Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Iris	\$529.39
66680	Repair Of Iris And Lens Tissue Without Suture Of The Iris	\$484.77
66680 66682	Repair Of Iris And Lens Tissue Without Suture Of The Iris Repair Of Iris And Lens Tissue With Suture Of The Iris	\$560.52
66680 66682 66700	Repair Of Iris And Lens Tissue Without Suture Of The Iris	

Codo	Description	Foo
	Description Destruction Of Tissue Encircling Lens Using Endoscope	Fee \$469.80
	Cyclocryotherapy; Initial	\$436.85
	Cyclodialysis; Initial	\$410.38
	Creation Of Eye Fluid Drainage Tracts In Iris Using Laser, Per Session	\$281.89
	Creation Of Openings In Iris For Eye Fluid Drainage Using Laser, 1 Or More Sessions	\$446.15
66770	Destruction Of Cyst Or Lesion Iris Or Ciliary Body (Nonexcisional Procedure)	\$494.34
66820	Removal Of Recurring Cataract In Lens Capsule With A Stab Incision	\$449.59
	Discission Of Secondary Membraneous Cataract (Opacified Posterior Lens Capsule And/Or Anterior Hyaloid; Laser Surgery (Eg, Yag Laser)	
	(One Or More Stages)	\$348.35
	Repositioning Of Intraocular Lens Prosthesis, Requiring An Incision (Separate Procedure)	\$786.60
	Removal Of Recurring Cataract In Lens Capsule With A Sectioning Of The Cornea And Scleral Areas	\$656.12
	Removal Of Lens Material; Aspiration Technique, One Or More Stages	\$640.65
	Fragmenting, Aspiration, And Removal Of Lens Material	\$809.36
	Removal Of Lens Material; Pars Plana Approach, With Or Without Vitrectomy	\$861.14
	Removal Of Lens Material; Intracapsular Extraction Lens With Or Without Iridectomy; Intracapsular, For Dislocated Lens	\$691.57 \$792.47
	Removal Of Lens Material; Extracapsular (Other Than 66840, 66850, 66852)	\$725.81
	Removal Of Cataract With Insertion Of Lens, Complex	\$765.15
	Removal Of Cataract With Insertion Of Lens, 1 Stage	\$795.22
	Removal Of Cataract With Insertion Of Lens, Simple	\$558.65
	Insertion Of Intraocular Lens Prosthesis (Secondary Implant) Not Associated With Concurrent Cataract Removal	\$790.94
66986	Exchange Of Intraocular Lens	\$834.57
	Complex Removal Of Cataract With Insertion Of Lens And Laser Treatment To Decrease Fluid Production In Eye	Price By Report
	Removal Of Cataract With Insertion Of Lens And Laser Treatment To Decrease Fluid Production In Eye	Price By Report
	Complex Extracapsular Removal Of Cataract With Insertion Of Artificial Lens And Insertion Of Drainage Device In Front Chamber Of Eye	\$747.86
	Use Of Ophthalmic Endoscope (List Separately In Addition To Code For Primary Procedure)	\$81.04
	Extracapsular Removal Of Cataract With Insertion Of Artificial Lens And Insertion Of Drainage Device In Front Chamber Of Eye	\$598.81
	Unlisted Procedure, Anterior Segment Of Eye	Price By Report
	Partial Removal Of Eye Fluid Between The Lens And Retina With Mechanical Vitrectomy	\$488.09
	Partial Removal Of Eye Fluid Between The Lens And Retina, Subtotal Removal With Mechanical Vitrectomy	\$502.34
67015	Aspiration Or Release Of Vitreous, Subretinal Or Choroidal Fluid, Pars Plana Approach (Posterior Sclerotomy)	\$538.55
67025	Injection Of Vitreous Substitute, Pars Plana Or Limbal Approach, (Fluid-Gas Exchange), With Or Without Aspiration (Separate Procedure)	\$696.41
	Implantation Of Intravitreal Drug Delivery System (Eg, Ganciclovir Implant), Includes Concomitant Removal Of Vitreous	\$782.66
	Intravitreal Injection Of A Pharmacologic Agent (Separate Procedure)	\$117.30
	Discission Of Vitreous Strands (Without Removal), Pars Plana Approach	\$521.49
	Severing Of Vitreous Strands, Vitreous Face Adhesions, Sheets, Membranes Or Opacities, Laser Surgery (One Or More Stages)	\$364.57
	Vitrectomy, Mechanical, Pars Plana Approach	\$919.66
	Laser Destruction Of Eye Fluid (Vitreous) Between The Lens And Retina, Focal	\$983.28
67040	Laser Destruction Of Eye Fluid (Vitreous) Between The Lens And Retina, All Of The Retina	\$1,061.21
67041	Vitrectomy, Mechanical, Pars Plana Approach; With Removal Of Preretinal Cellular Membrane (Eg, Macular Pucker)	\$1,170.30
67042	Removal Of Membrane From The Retina, Pars Plana Approach With Removal Of Internal Limiting Membrane Of Retina	\$1,170.30
	Removal Of Membrane From The Retina, Pars Plana Approach, With Removal Of Subretinal Membrane	\$1,110.64
	Repair Of Detached Retina, 1 Or More Sessions, With Cold Treatment	\$313.18
	Repair Of Detached Retina, 1 Or More Sessions, With A Lazer	\$276.23
	Repair Of Detached Retina And Drainage Of Eye Fluid Between Lens And Retina, Without Removal Of Vitreous Fluid	\$1,150.79
	Repair Of Detached Retina And Drainage Of Eye Fluid Between Lens And Retina, With Removal Of Vitreous Fluid	\$1,217.93
	Repair Of Retinal Detachment, One Or More Sessions; By Injection Of Air Or Other Gas (Eg, Pneumatic Retinopexy)	\$961.59
	Repair Of Detached Retina And Drainage Of Eye Fluid Between Lens And Retina, Complex Release Of Engireling Metarial (Pactoriar Sagment)	\$1,361.54
	Release Of Encircling Material (Posterior Segment)	\$461.31
	Removal Implanted Material, Posterior Segment Eye Removal Of Implanted Material, Posterior Segment; Intraocular	\$631.31 \$800.58
	Preventive Retinal Detachment Treatment By Heat Or Freezing, 1 Or More Sessions	\$281.59
	Preventive Retinal Detachment Treatment By Heat Or Laser, 1 Or More Sessions	\$251.79
	Destruction Of Retinal Growth By Heat Or Freezing, 1 Or More Sessions	\$559.49
	Laser Destruction Of Retinal Growth, 1 Or More Sessions	\$532.82
	Destruction Of Retinal Growth With Implantation Of Radiation Source, 1 Or More Sessions	\$1,287.77
	Destruction Of Vascular Growth Between Retina And Sclera, 1 Or More Sessions	\$494.26
67221	Destruction Of Localized Lesion Of Choroid (Eg, Choroidal Neovascularization); Photodynamic Therapy (Includes Intravenous Infusion)	\$254.32
	Destruction of Vascular Growth Between Retina And Sclera, At Single Session	\$254.32 \$26.94
	Destruction Of Leaking Retinal Blood Vessels, 1 Or More Sessions	\$275.25
	Laser Destruction Of Leaking Retinal Blood Vessels, 1 Or More Sessions	\$350.57
	Laser Destruction Or Freezing Of Extensive Leaking Retinal Blood Vessels, Preterm Infant, 1 Or More Sessions	\$1,054.61
	Scleral Reinforcement (Separate Procedure); Without Graft	\$861.18
	Scleral Reinforcement (Separate Procedure); With Graft	\$638.55
	Unlisted Procedure, Posterior Segment	Price By Report
67311	Strabismus Surgery, Recession Or Resection Procedure; One Horizontal Muscle	\$497.54
67312	Strabismus Surgery, Recession Or Resection Procedure (Patient Not Previously Operated On); Two Horizontal Muscles	\$718.07
	Strabismus Surgery, Recession Or Resection Procedure (Patient Not Previously Operated On); One Vertical Muscle (Excluding Superior	
67314	Oblique)	\$570.95
07015	Strabismus Surgery, Recession Or Resection Procedure (Patient Not Previously Operated On); Two Or More Vertical Muscles (Excluding	*** *********************************
	Superior Oblique) Strakiemus Surgan, Any Procedura, Superior Oblique Musela	\$729.06
0/318	Strabismus Surgery, Any Procedure, Superior Oblique Muscle Transposition Procedure (Eg, For Paretic Extraocular Muscle), Any Extraocular Muscle (Specify) (List Separately In Addition To Code For	\$635.09
1	Primary Procedure)	\$263.07
67320		

Code	Posserintian	Fee
Code	Description Strabismus Surgery On Patient With Previous Eye Surgery Or Injury That Did Not Involve The Extraocular Muscles (List Separately In Addition	гее
67331	To Code For Primary Procedure)	\$225.94
	Strabismus Surgery On Patient With Scarring Of Extraocular Muscles (Eg, Prior Occular Injury, Strabismus Or Retinal Detachment Surgery) Or	*
67332	Restrictive Myopathy (Eg, Dysthyroid Ophthalmopathy) (List Separately In Addition To Code For Primary Procedure) Strabismus Surgery By Posterior Fixation Suture Technique, With Or Without Muscle Recession (List Separately In Addition To Code For	\$270.59
67334	Primary Procedure)	\$222.67
07004	Placement Of Adjustable Suture(S) During Strabismus Surgery, Including Postoperative Adjustment(S) Of Suture(S) (List Separately In Addition	ΨΖΖΖ.01
67335	To Code For Specific Strabismus Surgery)	\$191.74
	Strabismus Surgery Involving Exploration And/Or Repair Of Detached Extraocular Muscle(S) (List Separately In Addition To Code For Primary	
	Procedure)	\$268.66
	Release Of Extensive Scar Tissue Without Detaching Extraocular Muscle (Separate Procedure)	\$620.78
	Chemodenervation Of Extraocular Muscle Biopsy Of Extraocular Muscle	\$223.64 \$175.16
	Eye Muscle Procedure	Price By Report
	Exploration Of Cavity Behind Eye, Frontal Or Transconjunctival Approach	\$820.33
	Orbitotomy Without Bone Flap (Frontal Approach); Drainage Only	\$858.07
67412	Orbitotomy Without Bone Flap (Frontal Approach); With Removal Lesion	\$1,052.01
	Orbitotomy Without Bone Flap (Frontal Approach); With Removal Foreign Body	\$916.95
	Removal Of Bone From Cavity Behind Eye, Without Bone Flap	\$1,377.05
	Fine Needle Aspiration Of Orbital Contents Odditatean With Bana Flag On Window Lateral Aspends (Fig. Krandsin) With Bana 101 January 101 J	\$94.24
	Orbitotomy With Bone Flap Or Window, Lateral Approach (Eg, Kroenlein); With Removal Of Lesion Orbitotomy With Bone Flap, Lateral Approach (Eg, Kroenlein); With Removal Foreign Body	\$1,543.58 \$1,314.97
	Orbitotomy With Bone Flap Or Window, Lateral Approach (Eg, Kroenlein); With Drainage	\$1,276.47
	Removal Of Bone From Cavity Behind Eye, With Bone Flap	\$1,439.74
	Exploration Of Cavity Behind Eye With Bone Flap, Lateral Approach	\$1,240.97
	Retrobulbar Injection; Medication (Separate Procedure, Does Not Include Supply Of Medication)	\$70.68
	Retrobulbar Injection; Alcohol	\$80.82
	Injection Of Medication Or Substance Into Membrane Covering Eyeball	\$48.11
	Injection Of Drug Into The Space Between The Cornea And Retina In The Eye	\$103.32
	Orbital Implant (Implant Outside Muscle Cone); Insertion	\$1,028.40
	Orbital Implant (Implant Outside Muscle Cone); Removal Or Revision Optic Nerve Decompression (Eq., Incision Or Fenestration Of Optic Nerve Sheath)	\$1,050.64
	Unlisted Procedure, Orbit	\$1,274.32 Price By Report
	Blepharotomy, Drainage Abscess Eyelid	\$203.81
	Severing Tarsorrhaphy	\$237.46
67715	Canthotomy (Separate Procedure)	\$256.36
67800	Removal Of Eyelid Growth, Chalazion (Chronic Inflammation Of The Meibomian Gland For The Eyelid)	\$121.10
	Excision Chalazion; Multiple, Same Lid	\$152.36
	Excision Chalazion; Multiple, Different Lids	\$139.48
	Excision Chalazion; Under General Anesthesia And/Or Requiring Hospitalization, Single Or Multiple Incisional Biopsy Of Eyelid Skin Including Lid Margin	\$249.38 \$131.38
	Correction Trichiasis; Epilation, Forceps Only	\$19.88
	Correction Of Trichiasis; Epilation By Other Than Forceps (Eg, By Electrosurgery, Cryotherapy, Laser Surgery)	\$120.47
	Correction Trichiasis; Incision Lid Margin	\$261.02
67835	Correction Trichiasis; Incision Lid Margin, With Free Mucous Membrane Graft	\$408.31
	Removal Of Eyelid Growth, Other Than Chalazion (Chronic Inflammation Of The Meibomian Gland For The Eyelid)	\$281.34
	Destruction Of Growth Of Eyelid Margin, 1.0 Cm Or Less	\$151.84
	Temporary Closure Of Eyelids By Suture (Eg, Frost Suture)	\$130.39
	Construction Intermarginal Adhesions, Median Tarsorrhaphy, Or Canthorrhaphy;	\$324.20
	Construction Intermarginal Adhesions, Median Tarsorrhaphy, Or Canthorrhaphy; With Transposition Of Tarsal Plate Repair Of Brow Ptosis (Supraciliary, Mid-Forehead Or Coronal Approach)	\$538.71 \$612.26
	Repair Of Upper Eyelid Muscle To Correct Drooping Or Paralysis, With External Material	\$654.93
	Repair Of Upper Eyelid Muscle To Correct Drooping Or Paralysis, With Internal Tissues	\$671.62
	Repair Of Blepharoptosis; (Tarso)Levator Resection Or Advancement, Internal Approach	\$632.89
	Repair Of Blepharoptosis; (Tarso)Levator Resection Or Advancement, External Approach	\$775.75
	Repair Of Blepharoptosis Superior Rectus Technique With Fascial Sling (Includes Obtaining Fascia)	\$466.04
	Removal Of Tissue, Muscle, And Membrane To Correct Eyelid Drooping Or Paralysis	\$513.72
	Reduction Of Overcorrection Of Ptosis	\$519.11
	Correction Of Lid Retraction Correction Of Lagophthalmos, With Implantation Of Upper Eyelid Lid Load (Eq. Gold Weight)	\$515.99 \$874.11
	Repair Ectropion; Suture	\$468.02
	Repair Ectropion; Thermocauterization	\$305.09
	Repair Of Ectropion; Excision Tarsal Wedge	\$582.53
	Repair Of Ectropion; Extensive (Eg, Tarsal Strip Operations)	\$594.00
	Repair Entropion; Suture	\$459.36
	Repair Entropion; Thermocauterization	\$295.27
	Repair Of Turning-Inward Eyelid Defect, Simple	\$582.63
	Repair Of Turning-Inward Eyelid Defect, Complex Suture Recent Wound, Eyelid, Involving Lid Margin, Tarsus, And/Or Palpebral Conjunctiva) Direct Closure; Partial Thickness	\$529.98 \$330.89
	Suture Recent Wound, Eyelid, Involving Lid Margin, Tarsus, And/Or Palpebral Conjunctiva) Direct Closure; Partial Trickness Suture Recent Wound, Eyelid, Involving Lid Margin, Tarsus, And/Or Palpebral Conjunctiva) Direct Closure; Full Thickness	\$535.16
	Removal Embedded Foreign Body, Eyelid	\$195.25
	Canthoplasty (Reconstruction Of Canthus)	\$606.17
	Excision And Repair Eyelid, Involving Lid Margin, Tarsus, Conjunctiva, Or Full Thickness, May Include Preparation For Skin Graft Or Pedicle	
67961	Flap With Adjacent Tissue Transfer Or Rearrangement; Up To One-Fourth Of Lid Margin	\$617.47
	Excision And Repair Eyelid, Involving Lid Margin, Tarsus, Conjunctiva, Or Full Thickness, May Include Preparation For Skin Graft Or Pedicle	*
6/966	Flap With Adjacent Tissue Transfer Or Rearrangement; Over One-Fourth Of Lid Margin	\$730.70

Code Description	Fee
Reconstruction Eyelid Full Thickness By Transfer Of Tarsoconjunctival Flap From Opposing Eyelid; Up To Two-Thirds Of Eyelid, One Stage Or 67971 First Stage	\$662.94
Reconstruction Eyelid Full Thickness By Transfer Of Tarsoconjunctival Flap From Opposing Eyelid; Total Eyelid, Lower, One Stage Or First Stage	\$851.73
Reconstruction Eyelid Full Thickness By Transfer Of Tarsoconjunctival Flap From Opposing Eyelid; Total Eyelid, Upper, One Stage Or First 67974 Stage	\$849.99
67975 Reconstruction Eyelid Full Thickness By Transfer Of Tarsoconjunctival Flap From Opposing Eyelid; Second Stage	\$627.91
67999 Unlisted Procedure, Eyelids 68020 Incision Conjunctiva, Drainage Cyst	Price By Report \$107.86
68040 Expression Conjunctival Follicles, Eg, For Trachoma	\$58.34
68100 Biopsy Conjunctiva	\$173.60
68110 Excision Lesion Conjunctiva; Up To 1 Cm	\$212.61
68115 Excision Lesion Conjunctiva; Over 1 Cm 68130 Removal Of Growth Of Sclera And Conjunctive	\$235.01 \$525.05
68135 Destruction Lesion Conjunctiva	\$146.56
68200 Subconjunctival Injection	\$41.62
68320 Repair Of Conjunctiva With Graft From External Eye	\$705.97
68325 Repair Of Conjunctiva With Graft From Cheek Tissue 68326 Reconstruction Of Conjunctiva, With Graft From The Outer Eye	\$605.30 \$626.83
68328 Reconstruction Of Conjunctiva, With Graft From The Cheek	\$649.86
68330 Repair Symblepharon; Conjunctivoplasty, Without Graft	\$591.57
68335 Release Of Scar Tissue From Eyelids With A Graft	\$596.03
68340 Release Of Scar Tissue From Eyelids Without A Graft	\$577.49
68360 Relocation Of Conjunctival Flap, Partial 68362 Relocation Of Conjunctival Flap, Total	\$515.04 \$609.07
68371 Harvesting Conjunctival Allograft, Living Donor	\$382.14
68399 Unlisted Procedure, Conjunctiva	Price By Report
68400 Incision, Drainage Lacrimal Gland	\$287.52
68420 Incision, Drainage Lacrimal Sac (Dacryocystotomy Or Dacryocystostomy) 68440 Snip Incision Lacrimal Punctum	\$320.80
68500 Excision Of Lacrimal Gland (Dacryoadenectomy), Except For Tumor; Total	\$97.49 \$996.90
68505 Excision of Lacrimal Gland (Dacryoadenectomy), Except For Tumor; Partial	\$992.53
68510 Biopsy Lacrimal Gland	\$430.00
68520 Excision Of Lacrimal Sac (Dacryocystectomy)	\$691.98
68525 Biopsy Of Lacrimal Sac 68530 Removal Of Foreign Body Or Dacryolith, Lacrimal Passages	\$236.62 \$415.57
68540 Excision Of Lacrimal Gland Tumor; Frontal Approach	\$920.58
68550 Excision Of Lacrimal Gland Tumor; Involving Osteotomy	\$1,147.41
68700 Plastic Repair Canaliculi	\$527.88
68705 Correction Everted Punctum, Cautery	\$251.90
68720 Dacryocystorhinostomy (Fistulization Of Lacrimal Sac To Nasal Cavity) 68745 Conjunctivorhinostomy (Fistulization Of Conjunctiva To Nasal Cavity); Without Tube	\$780.85 \$763.41
68750 Conjunctivorhinostomy (Fistulization Of Conjunctiva To Nasal Cavity); With Insertion Of Tube Or Stent	\$869.47
68760 Closure Of The Lacrimal Punctum; By Thermocauterization, Ligation, Or Laser Surgery	\$211.31
68761 Closure Of The Lacrimal Punctum; By Plug, Each	\$143.61
68770 Closure Lacrimal Fistula (Separate Procedure)	\$579.24
68801 Dilation Of Lacrimal Punctum, With Or Without Irrigation 68810 Probing Of Nasolacrimal Duct, With Or Without Irrigation;	\$101.65 \$169.63
68811 Probing Of Nasolacrimal Duct, With Or Without Irrigation; Requiring General Anesthesia	\$138.14
68815 Probing Of Nasolacrimal Duct, With Or Without Irrigation; With Insertion Of Tube Or Stent	\$402.48
68816 Probing Of Nasolacrimal Duct, With Or Without Irrigation; With Transluminal Balloon Catheter Dilation	\$655.98
68840 Probing Lacrimal Canaliculi, With Or Without Irrigation 68841 Insertion Of Drug Delivery Implant Into Tear Duct Of Eye	\$91.96 \$33.69
68850 Injection Contrast Medium For Dacryocystography	\$55.52
68899 Unlisted Procedure, Lacrimal System	Price By Report
69000 Incision And Drainage Of External Ear Abscess Or Blood Accumulation, Simple	\$130.70
69005 Incision And Drainage Of External Ear Abscess Or Blood Accumulation, Complicated 69020 Drainage External Auditory Canal, Abscess	\$152.55 \$212.27
69100 Biopsy External Ear	\$67.66
69105 Biopsy External Auditory Canal	\$103.56
69110 Excision External Ear; Partial, Simple Repair	\$423.79
69120 Excision External Ear; Complete Amputation 69140 Excision Exostosis(Es), External Auditory Canal	\$369.81
69140 Excision Exostosis(Es), External Auditory Canal 69145 Excision Soft Tissue Lesion, External Auditory Canal	\$810.50 \$291.98
69150 Removal Of Growth Of Ear Canal, Without Neck Dissection	\$945.37
69155 Removal Of Growth Of Ear Canal, With Neck Dissection	\$1,514.22
69200 Removal Foreign Body From External Auditory Canal; Without General Anesthesia	\$83.87
69205 Removal Foreign Body From External Auditory Canal; With General Anesthesia 69209 Removal Of Impacted Ear Wax By Washing	\$97.71
69210 Removal Of Impacted Ear Wax, One Ear	\$13.90 \$48.73
69220 Removal Of Skin Debris And Drainage Of Mastoid Cavity, Simple	\$53.19
69222 Removal Of Skin Debris And Drainage Of Mastoid Cavity, Complex	\$152.60
69300 Otoplasty, Protruding Ear, With Or Without Size Reduction	\$614.25
69310 Reconstruction Of External Auditory Canal (Meatoplasty) (Eg, For Stenosis Due To Injury, Infection) (Separate Procedure) 69320 Reconstruction External Auditory Canal For Congenital Atresia, Single Stage	\$817.08 \$1,484.06
69399 Unlisted Procedure, External Ear	Price By Report

Code	Description	Fee
-	Incision, Aspiration, And Inflation Of Eardrum Under Anesthesia	\$108.09
	Ventilating Tube Removal Requiring General Anesthesia	\$131.66
-	Tympanostomy (Requiring Insertion Of Ventilating Tube), Local Or Topical Anesthesia	\$141.40
69436	Tympanostomy (Requiring Insertion Of Ventilating Tube), General Anesthesia	\$164.86
	Middle Ear Exploration Through Postauricular Or Ear Canal Incision	\$655.63
	Tympanolysis, Transcanal	\$579.99
	Transmastoid Antrotomy ("Simple" Mastoidectomy)	\$668.16
	Mastoidectomy; Complete Mastoidectomy: Madified Redired	\$982.82
	Mastoidectomy; Modified Radical Mastoidectomy; Radical	\$1,170.61 \$1,196.71
	Petrous Apicectomy Including Radical Mastoidectomy	\$1,480.55
	Resection Temporal Bone, External Approach	\$2,493.34
	Excision Aural Polyp	\$204.58
69550	Excision Aural Glomus Tumor; Transcanal	\$1,013.85
69552	Excision Aural Glomus Tumor; Transmastoid	\$1,497.74
69554	Excision Aural Glomus Tumor; Extended (Extratemporal)	\$2,362.12
	Revision Mastoidectomy; Resulting In Complete Mastoidectomy	\$956.22
	Revision Of Previous Mastoid Surgery, Modified Radical Procedure	\$1,139.75
	Revision Of Previous Mastoid Surgery, Radical Procedure	\$1,221.37
	Revision Mastoidectomy; Resulting In Tympanoplasty Tympanic Membrane Repair, With Or Without Site Preparation Or Perforation For Closure With Or Without Patch	\$1,047.40
	Myringoplasty (Surgery Confined To Drumhead And Donor Area)	\$400.14 \$747.67
	Tympanoplasty Without Mastoidectomy (Including Canalplasty, Atticotomy And/Or Middle Ear Surgery), Initial Or Revision; Without Ossicular	\$141.01
	Chain Reconstruction	\$936.85
	Repair Of Eardrum, Ear Canal, And Bones	\$1,025.21
	Repair Of Eardrum, Ear Canal, And Bones With Insertion Of Prosthesis, Without Mastoidectomy	\$1,104.08
	Tympanoplasty With Antrotomy Or Mastoidotomy (Including Canalplasty, Atticotomy, Middle Ear Surgery, And/Or Tympanic Membrane Repair);	
69635	Without Ossicular Chain Reconstruction	\$1,202.26
	Repair Of Eardrum, Ear Canal, And Bones With Incision Of Mastoid Bone	\$1,340.38
	Repair Of Eardrum, Ear Canal, And Bones With Insertion Of Prosthesis With Opening Of Mastoid	\$1,420.13
	Repair Of Eardrum And Ear Canal With Removal Of Mastoid Bone, Complex	\$1,092.95
	Repair Of Eardrum, Ear Canal And Bones With Removal Of Mastoid Bone, Simple	\$1,400.52
	Repair Of Eardrum And Ear Canal With Removal Of Mastoid Bone, Simple Repair Of Eardrum, Ear Canal And Bones With Removal Of Mastoid Bone, With Intact Canal Wall	\$1,281.37 \$1,429.24
	Repair Of Eardrum And Ear Canal With Removal Of Mastoid Bone, Extensive Or Radical	\$1,510.12
	Repair Of Eardrum, Ear Canal And Bones With Removal Of Mastoid Bone, Extensive Or Radical	\$1,486.44
	Stapes Mobilization	\$758.57
	Stapedectomy Or Stapedotomy With Reestablishment Of Ossicular Continuity, With Or Without Use Of Foreign Material	\$869.14
69661	Stapedectomy With Reestablishment Of Ossicular Continuity, With Or Without Use Of Foreign Material; With Footplate Drill Out	\$1,129.68
69662	Revision Of Stapedectomy Or Stapedotomy	\$1,084.15
	Repair Oval Window Fistula	\$762.83
	Repair Round Window Fistula	\$763.14
	Mastoid Obliteration (Separate Procedure)	\$891.81
	Tympanic Neurectomy Clause Parteurisular Fintula Mactaid (Congrete Precedure)	\$789.74
69700	Closure Postauricular Fistula, Mastoid (Separate Procedure)	\$626.58
69705	Dilation Of Canal Between Middle Ear And Throat (Eustachian Tube) On One Side Of Body, Using Endoscope Inserted Through Nose	\$2,771.10
	Dilation Of Canal Between Middle Ear And Throat (Eustachian Tube) On Both Sides Of Body, Using Endoscope Inserted Through Nose	\$3,162.15
	Implantation Or Replacement Of Electromagnetic Bone Conduction Hearing Device In Temporal Bone Removal Or Repair Of Electromagnetic Bone Conduction Hearing Device In Temporal Bone	\$515.74 \$789.46
	Temporal Bone Implantation Of Cochlear Stimulating System, Accessed Through The Skin	\$789.46 \$669.33
	Implantation Of Cochlear Stimulating System Into Skull With Magnetic Attachment To External Speech Processor	\$543.36
	Temporal Bone Replacement Of Cochlear Stimulating System, Accessed Through The Skin	\$675.27
	Revision Or Replacement Of Cochlear Stimulating System Into Skull With Magnetic Attachment To External Speech Processor	\$563.13
69720	Release Of Facial Nerve, Lateral	\$1,116.57
	Release Of Facial Nerve, Medial	\$1,736.31
	Removal Of Cochlear Stimulating System From Skull With Attachment Through Skin To External Speech Processor	\$419.39
69727	Removal Of Cochlear Stimulating System From Skull With Magnetic Attachment To External Speech Processor	\$466.80
00700	Demousl Of Entire Cooklear Stimulating System From Outside Masteid Base Of Shull With Masset's Attack was To Establish Co. 1. 5	0=10:
	Removal Of Entire Cochlear Stimulating System From Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor	\$519.13
60700	Implantation Of Cooklear Stimulating System Outside Mactaid Rone Of Skull With Magnetic Attachment To External Space & Process	ФE07 00
69729	Implantation Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor	\$587.22
69730	Implantation Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion	\$600.39
69730 69740	Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor	\$600.39 \$1,083.82
69730 69740 69745	Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion	\$600.39 \$1,083.82 \$1,157.11 Price By Report
69730 69740 69745 69799 69801	Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion Repair Of Facial Nerve, Internal To The Geniculate Ganglion Unlisted Procedure, Middle Ear Incision Of Fluid Canals Of Inner Ear With Infusion Of Drugs, Transcanal Approach	\$600.39 \$1,083.82 \$1,157.11 Price By Report
69730 69740 69745 69799 69801 69805	Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion Repair Of Facial Nerve, Internal To The Geniculate Ganglion Unlisted Procedure, Middle Ear Incision Of Fluid Canals Of Inner Ear With Infusion Of Drugs, Transcanal Approach Endolymphatic Sac Operation; Without Shunt	\$600.39 \$1,083.82 \$1,157.11 Price By Report \$241.53 \$958.25
69730 69740 69745 69799 69801 69805 69806	Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion Repair Of Facial Nerve, Internal To The Geniculate Ganglion Unlisted Procedure, Middle Ear Incision Of Fluid Canals Of Inner Ear With Infusion Of Drugs, Transcanal Approach Endolymphatic Sac Operation; Without Shunt Endolymphatic Sac Operation; With Shunt	\$600.39 \$1,083.82 \$1,157.11 Price By Report \$241.53 \$958.25 \$862.85
69730 69740 69745 69799 69801 69805 69806 69905	Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion Repair Of Facial Nerve, Internal To The Geniculate Ganglion Unlisted Procedure, Middle Ear Incision Of Fluid Canals Of Inner Ear With Infusion Of Drugs, Transcanal Approach Endolymphatic Sac Operation; Without Shunt Endolymphatic Sac Operation; With Shunt Labyrinthectomy; Transcanal	\$600.39 \$1,083.82 \$1,157.11 Price By Report \$241.53 \$958.25 \$862.85
69730 69740 69745 69799 69801 69805 69806 69905 69910	Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion Repair Of Facial Nerve, Internal To The Geniculate Ganglion Unlisted Procedure, Middle Ear Incision Of Fluid Canals Of Inner Ear With Infusion Of Drugs, Transcanal Approach Endolymphatic Sac Operation; Without Shunt Endolymphatic Sac Operation; With Shunt Labyrinthectomy; Transcanal Labyrinthectomy; With Mastoidectomy	\$600.39 \$1,083.82 \$1,157.11 Price By Report \$241.53 \$958.25 \$862.85 \$866.80 \$925.72
69730 69740 69745 69799 69801 69805 69806 69905 69910	Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion Repair Of Facial Nerve, Internal To The Geniculate Ganglion Unlisted Procedure, Middle Ear Incision Of Fluid Canals Of Inner Ear With Infusion Of Drugs, Transcanal Approach Endolymphatic Sac Operation; Without Shunt Endolymphatic Sac Operation; With Shunt Labyrinthectomy; Transcanal Labyrinthectomy; With Mastoidectomy Vestibular Nerve Section, Translabyrinthine Approach	\$600.39 \$1,083.82 \$1,157.11 Price By Report \$241.53 \$958.25 \$862.85 \$866.80 \$925.72
69730 69740 69745 69799 69801 69805 69806 69905 69910 69915 69930	Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion Repair Of Facial Nerve, Internal To The Geniculate Ganglion Unlisted Procedure, Middle Ear Incision Of Fluid Canals Of Inner Ear With Infusion Of Drugs, Transcanal Approach Endolymphatic Sac Operation; Without Shunt Endolymphatic Sac Operation; With Shunt Labyrinthectomy; Transcanal Labyrinthectomy; With Mastoidectomy Vestibular Nerve Section, Translabyrinthine Approach Cochlear Device Implantation, With Or Without Mastoidectomy	\$600.39 \$1,083.82 \$1,157.11 Price By Report \$241.53 \$958.25 \$862.85 \$866.80 \$925.72 \$1,394.48 \$1,259.10
69730 69740 69745 69799 69801 69805 69905 69910 69915 69930 69949	Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion Repair Of Facial Nerve, Internal To The Geniculate Ganglion Unlisted Procedure, Middle Ear Incision Of Fluid Canals Of Inner Ear With Infusion Of Drugs, Transcanal Approach Endolymphatic Sac Operation; Without Shunt Endolymphatic Sac Operation; With Shunt Labyrinthectomy; Transcanal Labyrinthectomy; With Mastoidectomy Vestibular Nerve Section, Translabyrinthine Approach	\$600.39 \$1,083.82 \$1,157.11 Price By Report \$241.53 \$958.25 \$862.85 \$866.80 \$925.72

Code	Description	Fee
	Decompression Internal Auditory Canal	\$1,741.88
69970	Removal Of Tumor	\$1,970.87
69979	Unlisted Procedure, Temporal Bone, Middle Fossa Approach	Price By Report
	Microsurgical Techniques, Requiring Use Of Operating Microscope (List Separately In Addition To Code For Primary Procedure)	\$201.95
	Myelography, Posterior Fossa, Radiological Supervision And Interpretation	\$54.11
	Cisternography, Positive Contrast, Radiological Supervision And Interpretation	\$165.73
	Radiologic Examination, Eye, For Detection Of Foreign Body	\$24.61
	X-Ray Of Mandible, Less Than 4 Views	\$32.99
	X-Ray Of Mandible, Minimum Of 4 Views	\$41.76
	X-Ray Of Mastoid, Less Than 3 Views Per Side	\$34.99
	X-Ray Of Mastoid, Minimum Of 3 Views Per Side	\$60.84
	Radiologic Examination, Internal Auditory Meati, Complete	\$59.75
	X-Ray Of Bones Of Face, Less Than 3 Views	\$34.41
	X-Ray Of Bones Of Face, Minimum Of 3 Views	\$49.86
	X-Ray Of Bones Of Nose, Minimum Of 3 Views	\$32.52
	Dacryocystography, Nasolacrimal Duct, Radiological Supervision And Interpretation	\$50.84
	Radiologic Examination Optic Foramina	\$36.86
	X-Ray Of Eye Bones, Minimum Of 4 Views	\$50.81
	X-Ray Of Paranasal Sinus, Less Than 3 Views	\$34.78
	X-Ray Of Paranasal Sinus, Complete, Minimum Of 3 Views	\$40.58
	Radiologic Examination, Sella Turcica	\$31.95
	X-Ray Of Skull, Less Than 4 Views	\$38.41
	X-Ray Of Skull, Complete, Minimum Of 4 Views	\$48.22
	X-Ray Of Teeth, Single View	\$12.00
	X-Ray Of Teeth, Less Than Full Mouth	\$36.86
	X-Ray Of Teeth, Full Mouth	\$52.88
	Radiologic Examination, Temporomandibular Joint, Open And Closed Mouth Unilateral	\$31.33
	Radiologic Examination, Temporomandibular Joint, Open And Closed Mouth Bilateral	\$48.11
	Temporomandibular Joint Arthrography, Radiological Supervision And Interpretation	\$83.31
	Magnetic Resonance (Eg, Proton) Imaging, Temporomandibular Joint(S)	\$303.58
	Cephalogram, Orthodontic	\$15.27
	Orthopantogram (Eg, Panoramic X-Ray)	\$18.78
	Radiologic Examination Neck, Soft Tissue	\$28.02
	X-Ray Of Voice Box Or Throat	\$64.49
	Imaging Of Voice Box With Speech Evaluation	\$101.29
	Radiologic Examination, Salivary Gland For Calculus	\$36.53
	Sialography, Radiological Supervision And Interpretation	\$117.42
	Computed Tomography, Head Or Brain; Without Contrast Material	\$117.63
	Computerized Axial Tomography, Head Or Brain; With Contrast Material(S)	\$165.72
	Computerized Axial Tomography, Head Or Brain; Without Contrast Material, Followed By Contrast Material(S) And Further Sections	\$194.68
	Computed Tomography, Orbit, Sella, Or Posterior Fossa Or Outer, Middle, Or Inner Ear; Without Contrast Material	\$176.87
70481	Computerized Axial Tomography, Orbit, Sella, Or Posterior Fossa Or Outer, Middle, Or Inner Ear; With Contrast Material(S)	\$202.79
	Computerized Axial Tomography, Orbit, Sella, Or Posterior Fossa Or Outer, Middle, Or Inner Ear; Without Contrast Material, Followed By	
	Contrast Material(S) And Further Sections	\$238.05
	Computed Tomography, Maxillofacial Area; Without Contrast Material	\$142.71
70487	Computerized Axial Tomography, Maxillofacial Area; With Contrast Material(S)	\$170.09
70488	Computerized Axial Tomography, Maxillofacial Area; Without Contrast Material, Followed By Contrast Material(S) And Further Sections	\$207.76
	Computed Tomography, Soft Tissue Neck; Without Contrast Material	\$167.43
	Computerized Axial Tomography, Soft Tissue Neck; With Contrast Material(S)	\$207.04
	Computerized Axial Tomography, Soft Tissue Neck; Without Contrast Material Followed By Contrast Material(S) And Further Sections	\$248.84
	Computed Tomographic Angiography, Head, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image	·
70496	Postprocessing	\$466.88
	Computed Tomographic Angiography, Neck, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image	,
70498	Postprocessing	\$467.09
	Mri Scan Bones Of The Eye, Face, And/Or Neck	\$257.30
		\$275.18
	Mri Scan Bones Of The Eye, Face, And/Or Neck With Contrast	φ213.10
70542	Mri Scan Bones Of The Eye, Face, And/Or Neck With Contrast Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast	\$385.48
70542 70543		
70542 70543 70544	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast	\$385.48 \$243.14
70542 70543 70544 70545	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S)	\$385.48 \$243.14
70542 70543 70544 70545 70546	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S)	\$385.48 \$243.14 \$256.58
70542 70543 70544 70545 70546 70547	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences	\$385.48 \$243.14 \$256.58 \$372.51 \$243.86
70542 70543 70544 70545 70546 70547 70548	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S)	\$385.48 \$243.14 \$256.58 \$372.51 \$243.86 \$277.78
70542 70543 70544 70545 70546 70547 70548 70549	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S)	\$385.48 \$243.14 \$256.58 \$372.51 \$243.86 \$277.78
70542 70543 70544 70545 70546 70547 70548 70549 70551	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences	\$385.48 \$243.14 \$266.58 \$372.51 \$243.86 \$277.78 \$390.44
70542 70543 70544 70545 70546 70547 70548 70549 70551	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material	\$385.48 \$243.14 \$256.58 \$372.51 \$243.86 \$277.78 \$390.44
70542 70543 70544 70545 70546 70547 70548 70549 70551 70552	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material Magnetic Resonance (Eg, Proton) Imaging; Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences	\$385.48 \$243.14 \$266.58 \$372.51 \$243.86 \$277.78 \$390.44
70542 70543 70544 70545 70546 70547 70548 70549 70551 70552	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material Magnetic Resonance (Eg, Proton) Imaging; Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences	\$385.48 \$243.14 \$256.58 \$372.51 \$243.86 \$277.78 \$390.44 \$220.37 \$305.52
70542 70543 70544 70545 70546 70547 70548 70549 70551 70552	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg., Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Magnetic Resonance (Eg., Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And	\$385.48 \$243.14 \$256.58 \$372.51 \$243.86 \$277.78 \$390.44 \$220.37 \$305.52
70542 70543 70544 70545 70546 70547 70548 70549 70551 70552	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material Magnetic Resonance (Eg, Proton) Imaging; Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences	\$385.48 \$243.14 \$256.58 \$372.51 \$243.86 \$277.78 \$390.44 \$220.37 \$305.52
70542 70543 70544 70545 70546 70547 70548 70551 70552 70553	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material Magnetic Resonance (Eg, Proton) Imaging; Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And Administration Of Repetitive Body Part Movement And/Or Visual Stimulation, Not Requiring Physician Or Psychologist Administration	\$385.48 \$243.14 \$256.58 \$372.51 \$243.86 \$277.78 \$390.44 \$220.37 \$305.52
70542 70543 70544 70545 70546 70547 70548 70551 70552 70553 70554	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S), Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S), Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material Magnetic Resonance (Eg, Proton) Imaging; Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And Administration Of Repetitive Body Part Movement And/Or Visual Stimulation, Not Requiring Physician Or Psychologist Administration Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And Administration Of Repetitive Body Part Movement And/Or	\$385.48 \$243.14 \$256.58 \$372.51 \$243.86 \$277.78 \$390.44 \$220.37 \$305.52 \$360.17
70542 70543 70544 70545 70546 70547 70548 70551 70553 70554 70555 70557	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg. Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material Magnetic Resonance (Eg. Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg. Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And Administration Of Repetitive Body Part Movement And/Or Visual Stimulation, Not Requiring Physician Or Psychologist Administration Of Entire Neurofuntional Testing	\$385.48 \$243.14 \$256.58 \$372.51 \$243.86 \$277.78 \$390.44 \$220.37 \$305.52 \$360.17 \$387.92
70542 70543 70544 70545 70546 70547 70548 70551 70552 70553 70554 70555 70557 70558	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg. Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material Magnetic Resonance (Eg. Proton) Imaging; Magnetic Resonance (Eg. Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And Administration Of Repetitive Body Part Movement And/Or Visual Stimulation, Not Requiring Physician Or Psychologist Administration Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And Administration Of Repetitive Body Part Movement And/Or Visual Stimulation, Requiring Physician Or Psychologist Administration Of Entire Neurofuntional Testing Mri Scan Of Brain, During Open Brain Procedure	\$385.48 \$243.14 \$256.58 \$372.51 \$243.86 \$277.78 \$390.44 \$220.37 \$305.52 \$360.17 \$387.92
70542 70543 70544 70545 70546 70547 70548 70551 70552 70553 70554 70555 70558 70559	Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg., Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material Magnetic Resonance (Eg., Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg., Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And Administration Of Repetitive Body Part Movement And/Or Visual Stimulation, Not Requiring Physician Or Psychologist Administration Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And Administration Of Repetitive Body Part Movement And/Or Visual Stimulation, Requiring Physician Or Psychologist Administration Of Entire Neurofuntional Testing Mri Scan Of Brain, During Open Brain Procedure	\$385.48 \$243.14 \$256.58 \$372.51 \$243.86 \$277.78 \$390.44 \$220.37 \$305.52 \$360.17 \$387.92 \$134.99 \$154.37 \$173.08

Code	Description	Fee
	X-Ray Of Chest, 3 Views	\$41.38
	X-Ray Of Chest, Minimum Of 4 Views	\$45.68
	X-Ray Of Ribs Of One Side Of Body, 2 Views	\$37.89
	X-Ray Of Ribs On One Side Of Body Including The Chest, Minimum Of 3 Views	\$45.13
71110	X-Ray Of Both Sides Of The Ribs, 3 Views	\$47.12
71111	X-Ray Of Both Sides Of The Ribs Including The Chest, Minimum Of 4 Views	\$50.22
	X-Ray Of Breast Bone, Minimum Of 2 Views	\$36.23
71130	X-Ray Of Junction Of Breast And Collar Bones, Minimum Of 2 Views	\$37.40
	Diagnostic Ct Scan Of Chest	\$147.92
	Diagnostic Ct Scan Of Chest With Contrast	\$186.44
	Diagnostic Ct Scan Of Chest Before And After Contrast	\$221.33
71271	Low Dose Ct Scan Of Chest For Lung Cancer Screening	\$139.19
	Computed Tomographic Angiography, Chest (Noncoronary), With Contrast Material(S), Including Noncontrast Images, If Performed, And Image	
	Postprocessing	\$636.94
	Magnetic Resonance (Eg, Proton) Imaging, Chest (Eg, For Evaluation Of Hilar And Mediastinal Lymphadenopathy); Without Contrast	# 500.00
71550	Material(S)	\$562.26
71551	Magnetic Resonance (Eg, Proton) Imaging, Chest (Eg, For Evaluation Of Hilar And Mediastinal Lymphadenopathy); With Contrast Material(S)	¢207.04
	Magnetic Resonance (Eg, Proton) Imaging, Chest (Eg, Por Evaluation Of Filiar And Mediastinal Lymphadenopathy); Without Contrast Material (3)	\$387.04
	Material(S), Followed By Contrast Material(S) And Further Sequences	\$705.19
	Magnetic Resonance Angiography, Chest (Excluding Myocardium), With Or Without Contrast Material(S)	\$379.90
	X-Ray Of Spine, 1 View	\$26.69
	X-Ray Of Spine Of Neck, 2 Or 3 Views	\$39.11
	X-Ray Of Upper Spine, 4 Or 5 Views	\$57.29
	X-Ray Of Upper Spine, 1 Or Wore Views	\$70.26
	X-Ray Of Middle Spine, 2 Views	\$35.13
	X-Ray of Middle Spine, 3 Views	\$42.04
	X-Ray Of Middle Spine, Minimum Of 4 Views	\$44.97
	X-Ray Of Middle And Lower Spine, 2 Views	\$37.32
	X-Ray Of Spine, Entire Middle And Lower Spine, 1 View	\$42.11
72082	X-Ray Of Spine, Entire Middle And Lower Spine, 2 Or 3 Views	\$72.16
72083	X-Ray Of Spine, Entire Middle And Lower Spine, 4 Or 5 Views	\$73.91
72084	X-Ray Of Spine, Minimum Of 6 Views	\$88.04
72100	X-Ray Of Lower And Sacral Spine, 2 Or 3 Views	\$42.28
72110	X-Ray Of Lower And Sacral Spine, Minimum Of 4 Views	\$58.09
72114	Radiologic Examination, Spine, Lumbosacral; Complete, Including Bending Views, Minimum Of 6 Views	\$62.58
72120	Radiologic Examination, Spine, Lumbosacral; Bending Views Only, 2 Or 3 Views	\$44.27
72125	Computed Tomography, Cervical Spine; Without Contrast Material	\$145.02
72126	Computerized Axial Tomography, Cervical Spine; With Contrast Material	\$188.86
72127	Computerized Axial Tomography, Cervical Spine; Without Contrast Material, Followed By Contrast Material(S) And Further Sections	\$222.19
	Computed Tomography, Thoracic Spine; Without Contrast Material	\$144.65
	Computerized Axial Tomography, Thoracic Spine; With Contrast Material	\$190.32
	Computerized Axial Tomography, Thoracic Spine; Without Contrast Material, Followed By Contrast Material(S) And Further Sections	\$200.83
	Computed Tomography, Lumbar Spine; Without Contrast Material	\$144.28
72132	Computerized Axial Tomography, Lumbar Spine; With Contrast Material	\$188.86
72133	Computerized Axial Tomography, Lumbar Spine; Without Contrast Material, Followed By Contrast Material(S) And Further Sections	\$221.82
72141	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Cervical Without Contrast Material	\$215.28
72142	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Cervical With Contrast Material(S)	\$312.80
	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Thoracic Without Contrast Material	\$214.92
	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Thoracic With Contrast Material(S)	\$309.52
72148	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Lumbar Without Contrast Material	\$215.65
-	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Lumbar With Contrast Material(S)	\$306.98
	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Without Contrast Material, Followed By Contrast Material(S) And	_
72156	Further Sequences; Cervical	\$362.83
	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Without Contrast Material, Followed By Contrast Material(S) And	
	Further Sequences; Thoracic	\$363.18
	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Without Contrast Material, Followed By Contrast Material(S) And	#004 74
	Further Sequences; Lumbar Magnetic Recognition Angiography, Spiral Conel And Contents, With Or Without Contract Material(S)	\$361.74
	Magnetic Resonance Angiography, Spinal Canal And Contents, With Or Without Contrast Material(S)	\$353.36
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	X-Ray Of Pelvis, 1 Or 2 Views	
	X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views	
72190	X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image	\$41.52
72190 72191	X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing	\$41.52 \$470.40
72190 72191 72192	X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing Computed Tomography, Pelvis; Without Contrast Material	\$41.52 \$470.40 \$148.28
72190 72191 72192 72193	X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing Computed Tomography, Pelvis; Without Contrast Material Computerized Axial Tomography, Pelvis; With Contrast Material(S)	\$41.52 \$470.40 \$148.28 \$363.01
72190 72191 72192 72193 72194	X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing Computed Tomography, Pelvis; Without Contrast Material Computerized Axial Tomography, Pelvis; With Contrast Material(S) Computerized Axial Tomography, Pelvis; Without Contrast Material, Followed By Contrast Material(S) And Further Sections	\$41.52 \$470.40 \$148.28 \$363.01 \$436.19
72190 72191 72192 72193 72194 72195	X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing Computed Tomography, Pelvis; Without Contrast Material Computerized Axial Tomography, Pelvis; With Contrast Material(S)	\$41.52 \$470.40 \$148.28 \$363.01 \$436.19 \$261.43
72190 72191 72192 72193 72194 72195	X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing Computed Tomography, Pelvis; Without Contrast Material Computerized Axial Tomography, Pelvis; With Contrast Material(S) Computerized Axial Tomography, Pelvis; Without Contrast Material, Followed By Contrast Material(S) And Further Sections Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S)	\$41.52 \$470.40 \$148.28 \$363.01 \$436.19 \$261.43
72190 72191 72192 72193 72194 72195 72196	X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing Computed Tomography, Pelvis; Without Contrast Material Computerized Axial Tomography, Pelvis; With Contrast Material(S) Computerized Axial Tomography, Pelvis; Without Contrast Material, Followed By Contrast Material(S) And Further Sections Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S)	\$41.52 \$470.40 \$148.28 \$363.01 \$436.19 \$261.43 \$275.63
72190 72191 72192 72193 72194 72195 72196 72197	X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing Computed Tomography, Pelvis; Without Contrast Material Computerized Axial Tomography, Pelvis; With Contrast Material(S) Computerized Axial Tomography, Pelvis; Without Contrast Material, Followed By Contrast Material(S) And Further Sections Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S) Magnetic Resonance (Eg, Proton) Imaging, Pelvis; With Contrast Material(S)	\$41.52 \$470.40 \$148.28 \$363.01 \$436.19 \$261.43 \$275.63
72190 72191 72192 72193 72194 72195 72196 72197 72198	X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing Computed Tomography, Pelvis; Without Contrast Material Computerized Axial Tomography, Pelvis; With Contrast Material(S) Computerized Axial Tomography, Pelvis; Without Contrast Material, Followed By Contrast Material(S) And Further Sections Magnetic Resonance (Eg, Proton) Imaging, Pelvis; With Contrast Material(S) Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S) Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences	\$41.52 \$470.40 \$148.28 \$363.01 \$436.19 \$261.43 \$275.63 \$384.75
72190 72191 72192 72193 72194 72195 72196 72197 72198 72200	X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing Computed Tomography, Pelvis; Without Contrast Material Computerized Axial Tomography, Pelvis; With Contrast Material(S) Computerized Axial Tomography, Pelvis; Without Contrast Material, Followed By Contrast Material(S) And Further Sections Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S) Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S) Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Pelvis, With Or Without Contrast Material(S)	\$148.28
72190 72191 72192 72193 72194 72195 72196 72197 72198 72200 72202	X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing Computed Tomography, Pelvis; Without Contrast Material Computerized Axial Tomography, Pelvis; With Contrast Material(S) Computerized Axial Tomography, Pelvis; Without Contrast Material, Followed By Contrast Material(S) And Further Sections Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S) Magnetic Resonance (Eg, Proton) Imaging, Pelvis; With Contrast Material(S) Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Pelvis, Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Pelvis, With Or Without Contrast Material(S) X-Ray Of Sacroiliac Joints, Less Than 3 Views	\$41.52 \$470.40 \$148.28 \$363.01 \$436.19 \$261.43 \$275.63 \$384.75 \$343.55
72190 72191 72192 72193 72194 72195 72196 72197 72198 72200 72202 72220	X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing Computed Tomography, Pelvis; Without Contrast Material Computerized Axial Tomography, Pelvis; With Contrast Material(S) Computerized Axial Tomography, Pelvis; Without Contrast Material, Followed By Contrast Material(S) And Further Sections Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S) Magnetic Resonance (Eg, Proton) Imaging, Pelvis; With Contrast Material(S) Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Pelvis, With Or Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Pelvis, With Or Without Contrast Material(S) X-Ray Of Sacroiliac Joints, Less Than 3 Views X-Ray Of Sacroiliac Joints, Jor More Views	\$41.52 \$470.40 \$148.28 \$363.01 \$436.19 \$261.43 \$275.63 \$384.75 \$343.55 \$28.47 \$33.06

Codo	Description	Foo
	Description Myelography, Lumbosacral, Radiological Supervision And Interpretation	Fee \$106.20
	Radiological Supervision And Interpretation X-Ray Of Spinal Canal, 2 Or More Spinal Regions	\$161.71
	Radiological Supervision And Interpretation X-Ray Of Disc Of Vertebra, Upper Or Middle Spine	\$122.66
	Radiological Supervision And Interpretation X-Ray Of Disc Of Vertebra, Lower Spine	\$120.67
73000	Radiologic Examination Clavicle, Complete	\$31.65
73010	Radiologic Examination Scapula, Complete	\$25.33
	X-Ray Of Shoulder, 1 View	\$22.79
	X-Ray Of Shoulder, Minimum Of 2 Views	\$35.62
	Radiologic Examination, Shoulder, Arthrography, Radiological Supervision And Interpretation	\$94.67
	Radiologic Examination Acromioclavicular Joints, Bilateral, With Or Without Weighted Distraction	\$30.41
	X-Ray Of Upper Arm, Minimum Of 2 Views	\$35.18
	X-Ray Of Elbow, 2 Views	\$31.19
	X-Ray Of Elbow, Minimum Of 3 Views	\$35.18
	Radiologic Examination, Elbow, Arthrography, Radiological Supervision And Interpretation	\$110.24
	X-Ray Of Forearm, 2 Views	\$31.65
	Radiologic Examination Upper Extremity, Infant, Minimum Of Two Views	\$30.43
	X-Ray Of Wrist, 2 Views	\$31.14
	X-Ray Of Wrist, Minimum Of 3 Views Radiologic Examination, Wrist, Arthrography, Radiological Supervision And Interpretation	\$32.94
	X-Ray Of Hand, 2 Views	\$123.46 \$30.43
	X-Ray Of Hand, Minimum Of 3 Views	\$32.94
	X-Ray Of Fingers, Minimum Of 2 Views	\$26.54
	Computed Tomography, Upper Extremity; Without Contrast Material	\$277.92
	Computerized Axial Tomography, Upper Extremity; With Contrast Material(S)	\$277.92
	Computerized Axial Tomography, Opper Extremity; Without Contrast Material, Followed By Contrast Material(S) And Further Sections	\$333.40
, 5202	Computed Tomographic Angiography, Upper Extremity, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image	ψ555.40
73206	Postprocessing	\$470.42
	Magnetic Resonance (Eg, Proton) Imaging, Upper Extremity, Other Than Joint; Without Contrast Material(S)	\$452.69
	Magnetic Resonance (Eg, Proton) Imaging, Upper Extremity, Other Than Joint; With Contrast Material(S)	\$341.68
	Magnetic Resonance (Eq. Proton) Imaging, Upper Extremity, Other Than Joint; Without Contrast Material(S), Followed By Contrast Material(S)	*
73220	And Further Sequences	\$483.41
73221	Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Upper Extremity; Without Contrast Material(S)	\$228.00
73222	Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Upper Extremity; With Contrast Material(S)	\$359.67
	Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Upper Extremity; Without Contrast Material(S), Followed By Contrast Material(S) And	
73223	Further Sequences	\$445.07
	Magnetic Resonance Angiography, Upper Extremity, With Or Without Contrast Material(S)	\$389.35
73501	X-Ray Of Hip With Pelvis, 1 View	\$32.51
	X-Ray Of Hip With Pelvis, 2-3 Views	\$45.09
	X-Ray Of Hip With Pelvis, Minimum Of 4 Views	\$56.25
	X-Ray Of Both Hips With Pelvis, 2 Views	\$43.51
	X-Ray Of Both Hips With Pelvis, 3-4 Views	\$53.10
	X-Ray Of Both Hips With Pelvis, Minimum Of 5 Views	\$61.73
	Radiologic Examination, Hip, Arthrography, Radiological Supervision And Interpretation	\$105.97
	X-Ray Of Femur, 1 View	\$30.18
	X-Ray Of Femur, Minimum 2 Views	\$35.26
	X-Ray Of Knee, 1 Or 2 Views X-Ray Of Knee, 3 Views	\$32.82
		\$35.92
	X-Ray Of Knee, 4 Or More Views X-Ray Of Both Knees, Standing, Front To Back View	\$40.66
	Radiologic Examination, Knee, Arthrography, Radiological Supervision And Interpretation	\$31.58 \$144.47
	X-Ray Of Lower Leg, 2 Views	\$32.52
	Radiologic Examination Lower Extremity, Infant, Minimum Of Two Views	\$30.83
	X-Ray Of Ankle, 2 Views	\$30.43
	X-Ray Of Ankle, Minimum Of 3 Views	\$32.94
	Radiologic Examination, Ankle, Arthrography, Radiological Supervision And Interpretation	\$117.97
	X-Ray Of Foot, 2 Views	\$30.43
	X-Ray Of Foot, Minimum Of 3 Views	\$32.94
	X-Ray Of Heel, Minimum Of 2 Views	\$29.61
	X-Ray Of Toes, Minimum Of 2 Views	\$25.36
	Computed Tomography, Lower Extremity; Without Contrast Material	\$144.28
	Computerized Axial Tomography, Lower Extremity; With Contrast Material(S)	\$186.80
	Computerized Axial Tomography, Lower Extremity; Without Contrast Material, Followed By Contrast Material(S) And Further Sections	\$218.79
	Computed Tomographic Angiography, Lower Extremity, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image	
	Postprocessing	\$475.78
	Magnetic Resonance (Eg, Proton) Imaging, Lower Extremity Other Than Joint; Without Contrast Material(S)	\$254.04
73719	Magnetic Resonance (Eg, Proton) Imaging, Lower Extremity Other Than Joint; With Contrast Material(S)	\$298.99
	Magnetic Resonance (Eg, Proton) Imaging, Lower Extremity Other Than Joint; Without Contrast Material(S), Followed By Contrast Material(S)	
	And Further Sequences	\$384.75
73721	And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material	\$227.64
73721	And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; With Contrast Material(S)	
73721 73722	And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; With Contrast Material(S) Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material(S), Followed By Contrast Material(S) And	\$227.64 \$360.39
73721 73722 73723	And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; With Contrast Material(S) Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences	\$227.64 \$360.39 \$443.61
73721 73722 73723 73725	And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; With Contrast Material(S) Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Lower Extremity, With Or Without Contrast Material(S)	\$227.64 \$360.39 \$443.61 \$380.27
73721 73722 73723 73725 74018	And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; With Contrast Material(S) Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Lower Extremity, With Or Without Contrast Material(S) X-Ray Of Abdomen, 1 View	\$227.64 \$360.39 \$443.61 \$380.27 \$32.99
73721 73722 73723 73725 74018 74019	And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; With Contrast Material(S) Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Lower Extremity, With Or Without Contrast Material(S) X-Ray Of Abdomen, 1 View X-Ray Of Abdomen, 2 Views	\$227.64 \$360.39 \$443.61 \$380.27 \$32.99 \$35.30
73721 73722 73723 73725 74018 74019 74021	And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; With Contrast Material(S) Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Lower Extremity, With Or Without Contrast Material(S) X-Ray Of Abdomen, 1 View	\$227.64 \$360.39 \$443.61 \$380.27 \$32.99

	Description	Fee
	Computed Tomography, Abdomen; Without Contrast Material	\$152.53
	Computerized Axial Tomography, Abdomen; With Contrast Material(S)	\$369.66
74170	Computerized Axial Tomography, Abdomen; Without Contrast Material, Followed By Contrast Material(S) And Further Sections	\$446.91
7/17/	Computed Tomographic Angiography, Abdomen And Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing	¢420.02
74174	Computed Tomographic Angiography, Abdomen, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image	\$429.93
74175	Postprocessing	\$475.17
	Computed Tomography, Abdomen And Pelvis; Without Contrast Material	\$190.87
	Computed Tomography, Abdomen And Pelvis; With Contrast Material	\$301.19
	Computed Tomography, Abdomen And Pelvis; Without Contrast Material In One Or Both Body Regions, Followed By Contrast Material(S) And	*
	Further Sections In One Or Both Body Regions	\$381.77
	Magnetic Resonance (Eg, Proton) Imaging, Abdomen; Without Contrast Material(S)	\$221.33
74182	Magnetic Resonance (Eg, Proton) Imaging, Abdomen; With Contrast Material(S)	\$345.14
	Magnetic Resonance (Eg, Proton) Imaging, Abdomen; Without Contrast Material(S), Followed By With Contrast Material(S) And Further	
	Sequences	\$385.48
	Magnetic Resonance Angiography, Abdomen, With Or Without Contrast Material(S)	\$382.44
	Peritoneogram (Eg, After Injection Of Air Or Contrast), Radiological Supervision And Interpretation	\$63.77
	X-Ray Of Voice Box And/Or Esophagus In Neck With Contrast	\$96.39
	X-Ray Of Esophagus With Single Contrast	\$78.60
	X-Ray Of Esophagus With Double Contrast	\$113.91
	Imaging For Evaluation Of Swallowing Function Page 19 of Foreign Red (S) Fore	\$92.75
	Removal Of Foreign Body(S), Esophageal, With Use Of Balloon Catheter, Radiological Supervision And Interpretation	\$161.33
	X-Ray Of Upper Digestive Tract With Single Contrast X-Ray Of Upper Digestive Tract With Double Contrast	\$104.79 \$113.16
	Follow-Through X-Ray Of Upper Digestive Tract With Multiple Serial Films	\$113.16 \$86.23
	X-Ray Of Upper Digestive Tract With Single Contrast And Multiple Serial Films	\$89.39
	X-Ray Of Upper Digestive Tract With Jongle Contrast And Multiple Serial Films X-Ray Of Upper Digestive Tract With Double Contrast And Multiple Serial Films	\$73.10
	Computed Tomographic (Ct) Colonography, Diagnostic, Including Image Postprocessing; Without Contrast Material	\$335.16
74201	Computed Tomographic (Ct) Colonography, Diagnostic, Including Image Postprocessing; With Contrast Material(S) Including Non-Contrast	ψ000.10
74262	Images, If Performed	\$456.91
	Computed Tomographic (Ct) Colonography, Screening, Including Image Postprocessing	Price By Report
	X-Ray Of Large Bowel With Contrast	\$115.88
74280	X-Ray Of Large Bowel With Air Contrast	\$162.31
74283	Imaging Of Colon Using Enema	\$185.58
74290	Imaging Of Gallbladder With Contrast	\$86.24
74300	Cholangiography And/Or Pancreatography; Intraoperative, Radiological Supervision And Interpretation	\$22.23
	Cholangiography And/Or Pancreatography; Additional Set Intraoperative, Radiological Supervision And Interpretation (List Separately In	
	Addition To Code For Primary Procedure)	\$12.00
	Endoscopic Catheterization Of The Biliary Ductal System, Radiological Supervision And Interpretation	\$152.11
	Endoscopic Catheterization Of The Pancreatic Ductal System, Radiological Supervision And Interpretation	\$152.11
	Combined Endoscopic Catheterization Of The Biliary And Pancreatic Ductal Systems, Radiological Supervision And Interpretation	\$152.11
	Radiological Supervision And Interpretation Of Placement Of Long Small Bowel Tube Procedure	\$125.01
	Percutaneous Placement Of Enteroclysis Tube, Radiological Supervision And Interpretation	\$137.39
74360	Intraluminal Dilation Of Strictures And/Or Obstructions (Eg, Esophagus), Radiological Supervision And Interpretation	\$143.14
74262	Persutanguia Transponetia Dilation of Biliany Duct Stricture With Or Without Diagonant Of Start, Padialogical Supposicion, And Interpretation	#267.00
	Percutaneous Transhepatic Dilation Of Biliary Duct Stricture With Or Without Placement Of Stent, Radiological Supervision And Interpretation Imaging Of Urinary Tract With Injection Of Contrast Into A Vein	\$267.09 \$102.31
	Imaging Of Urinary Tract Using Infusion Technique	\$139.00
	Imaging Of Urinary Tract Using Infusion Technique With Kidney Section Filming	\$153.71
	Imaging Of Urinary Tract	\$82.50
	Radiological Supervision And Interpretation Of X-Ray Imaging Of Urinary Tract	\$125.07
	Radiological Supervision And Interpretation X-Ray Of Urinary Bladder, Minimum Of 3 Views	\$43.49
	Vasography, Vesiculography, Or Epididymography, Radiological Supervision And Interpretation	\$96.37
	Corpora Cavernosography, Radiological Supervision And Interpretation	\$105.26
	Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Before And After Dye Injection	\$70.76
74455	Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Emptying	\$88.01
74470	Radiological Supervision And Interpretation X-Ray Of Kidney Cyst, Lower Back Contrast Injection	\$75.76
74485	Radiological Supervision And Interpretation Of Dilation Of Urinary Ducts (Ureters) Or Bladder Canal (Urethra)	\$116.43
74712	Magnetic Resonance Imaging Of Fetus, Single Or First Pregnancy	\$463.23
74713	Magnetic Resonance Imaging Of Fetus, Each Additional Pregnancy	\$202.91
	Hysterosalpingography, Radiological Supervision And Interpretation	\$70.04
	Transcervical Catheterization Of Fallopian Tube, Radiological Supervision And Interpretation	\$145.86
	Perineogram (Eg, Vaginogram, For Sex Determination Or Extent Of Anomalies)	\$87.94
	Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material;	\$318.48
75559	Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging	\$386.94
75501	Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And	*
75561	Further Sequences; Continue Magnetic Research Regions For Marchelegy And Function Without Contract Material(S), Followed By Contract Material(S) And	\$418.29
75560	Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences; With Stress Imaging	¢444 22
		\$441.33 \$52.82
	Cardiac Magnetic Resonance Imaging For Velocity Flow Mapping (List Separately In Addition To Code For Primary Procedure) Computed Tomography, Heart, Without Contrast Material, With Quantitative Evaluation Of Coronary Calcium	\$80.28
10011	Computed Tomography, Heart, With Contrast Material, With Quantitative Evaluation Of Coronary Calcium Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology (Including 3D Image	φου.28
75572	Postprocessing, Assessment Of Cardiac Function, And Evaluation Of Venous Structures, If Performed)	\$252.97
. 55, 2		\$202.01
	Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart	
75573	Disease (Including 3D Image Postprocessing, Assessment Of Lv Cardiac Function, Rv Structure And Function And Evaluation Of V	\$410.11

Code	Description	Fee
	Computed Tomographic Angiography, Heart, Coronary Arteries And Bypass Grafts (When Present), With Contrast Material, Including 3D Image	
75574	Postprocessing (Including Evaluation Of Cardiac Structure And Morphology, Assessment Of Cardiac Function, And Evalua	\$422.19
75580	Analysis Of Data From CT Study Of Heart Blood Vessels To Assess Severity Of Heart Artery Disease, With Interpretation And Report	\$797.58
	Aortography, Thoracic, Without Serialography, Radiological Supervision And Interpretation	\$182.96
	Radiological Supervision And Interpretation X-Ray Of Chest Aorta, Using Rapid Sequence	\$128.46
75625	Aortography, Abdominal, By Serialography, Radiological Supervision And Interpretation	\$133.82
75630	Aortography, Abdominal Plus Bilateral Iliofemoral Lower Extremity, Catheter, By Serialography, Radiological Supervision And Interpretation	\$166.66
	Computed Tomographic Angiography, Abdominal Aorta And Bilateral Iliofemoral Lower Extremity Runoff, With Contrast Material(S), Including	
	Noncontrast Images, If Performed, And Image Postprocessing	\$505.09
	Angiography, Spinal, Selective, Radiological Supervision And Interpretation Angiography, Extremity, Unilateral, Radiological Supervision And Interpretation	\$228.67 \$158.78
	Angiography, Extremity, Bilateral, Radiological Supervision And Interpretation	\$171.86
75726	Angiography, Visceral, Selective Or Supraselective, (With Or Without Flush Aortogram), Radiological Supervision And Interpretation	\$180.90
	Radiological Supervision And Interpretation Of Imaging Of Artery Of One Adrenal Gland	\$145.68
	Angiography, Adrenal, Bilateral, Selective, Radiological Supervision And Interpretation	\$161.81
	Angiography, Pelvic, Selective Or Supraselective, Radiological Supervision And Interpretation	\$150.00
	Angiography, Pulmonary, Unilateral, Selective, Radiological Supervision And Interpretation	\$138.98
	Angiography, Pulmonary, Bilateral, Selective, Radiological Supervision And Interpretation Radiological Supervision And Interpretation Of Imaging Of Lung Artery, Contrast Inserted By Catheter Or Injection Into Vein	\$157.52 \$128.35
	Angiography, Internal Mammary, Radiological Supervision And Interpretation	\$168.06
	Angiography, Selective, Each Additional Vessel Studied After Basic Examination, Radiological Supervision And Interpretation (List Separately In	·
	Addition To Code For Primary Procedure)	\$103.36
	Lymphangiography, Extremity Only, Unilateral, Radiological Supervision And Interpretation Radiological Supervision And Interpretation Of Imaging Of Lymphatic System Of Both Arms Or Legs	\$239.04 \$259.20
	Radiological Supervision And Interpretation of Imaging of Lymphatic System of One Side of Pelvis And Abdomen	\$263.03
	Lymphangiography, Pelvic/Abdominal, Bilateral, Radiological Supervision And Interpretation	\$283.14
	Shuntogram For Investigation Of Previously Placed Indwelling Nonvascular Shunt (Eg, Leveen Shunt, Ventriculoperitoneal Shunt, Indwelling	
	Infusion Pump), Radiological Supervision And Interpretation Radiological Supervision And Interpretation X-Ray Of Vein Of Spleen And Liver	\$58.21 \$512.89
	Venography, Extremity, Unilateral, Radiological Supervision And Interpretation	\$83.79
	Radiological Supervision And Interpretation Of Imaging Of Veins Of Both Arms Or Legs	\$142.14
	Venography, Caval, Inferior, With Serialography, Radiological Supervision And Interpretation	\$120.46
	Venography, Caval, Superior, With Serialography, Radiological Supervision And Interpretation	\$127.00
	Venography, Renal, Unilateral, Selective, Radiological Supervision And Interpretation Venography, Renal, Bilateral, Selective, Radiological Supervision And Interpretation	\$126.99 \$139.94
	Venography, Nenal, Unilateral, Selective, Radiological Supervision And Interpretation Venography, Adrenal, Unilateral, Selective, Radiological Supervision And Interpretation	\$138.11
	Venography, Adrenal, Bilateral, Selective, Radiological Supervision And Interpretation	\$152.22
	Venography, Venous Sinus (Eg, Petrosal And Inferior Sagittal) Or Jugular, Catheter, Radiological Supervision And Interpretation	\$134.25
	Radiological Supervision And Interpretation Of Imaging Of Vein System Of Head	\$170.51
	Venography, Epidural, Radiological Supervision And Interpretation Venography, Orbital, Radiological Supervision And Interpretation	\$124.30 \$104.23
73000	Radiological Supervision And Interpretation Of Imaging Of Liver Vein With Assessment Of Blood Flow, Injection Of Contrast (Accessed Through	ψ104.20
	The Skin)	\$144.43
	Radiological Supervision And Interpretation Of Imaging Of Liver Vein, Injection Of Contrast (Accessed Through The Skin)	\$146.97
	Hepatic Venography, Wedged Or Free, With Hemodynamic Evaluation, Radiological Supervision And Interpretation Hepatic Venography, Wedged Or Free, Without Hemodynamic Evaluation, Radiological Supervision And Interpretation	\$131.82 \$132.55
73031	Venous Sampling Through Catheter, With Or Without Angiography (Eg, For Parathyroid Hormone, Renin), Radiological Supervision And	ψ132.33
75893	Interpretation	\$110.73
	Transcatheter Therapy, Embolization, Any Method, Radiological Supervision And Interpretation	\$955.00
	Imaging Of Blood Vessel Radiologic Supervision And Interpretation	\$135.11 \$233.53
73301	Mechanical Removal Of Intraluminal (Intracatheter) Obstructive Material From Central Venous Device Through Device Lumen, Radiologic	Ψ233.33
75902	Supervision And Interpretation	\$90.83
75956	Radiological Supervision And Interpretation Of Repair Of Chest Aorta With Graft, Involving Coverage Of Artery Origin	\$370.27
	Endovascular Repair Of Descending Thoracic Aorta (Eg, Aneurysm, Pseudoaneurysm, Dissection, Penetrating Ulcer, Intramural Hematoma,	
75957	Or Traumatic Disruption); Not Involving Coverage Of Left Subclavian Artery Origin, Initial Endoprosthesis Plus Descending Thoracic Aor	\$278.41
75958	Radiological Supervision And Interpretation Of Placement Of Blood Vessel Central Extension Prosthesis Procedure	\$185.47
	Radiological Supervision And Interpretation Of Placement Of Blood Vessel Outer Extension Prosthesis Procedure	\$162.62
75970	Transcatheter Biopsy, Radiological Supervision And Interpretation Change Of Percutaneous Tube Or Drainage Catheter With Contrast Monitoring (Eq. Genitourinary System, Abscess), Radiological Supervision	\$468.97
75984	And Interpretation	\$104.55
2201	Radiological Guidance (le, Fluoroscopy, Ultrasound, Or Computed Tomography), For Percutaneous Drainage (Eg, Abscess, Specimen	ţ.c30
	Collection), With Placement Of Catheter, Radiological Supervision And Interpretation	\$122.14
	Imaging Guidance For Procedure, Up To 1 Hour	\$45.33
	Imaging From Nose To Rectum, Single View, Child Radiologic Examination, Abscess, Fistula Or Sinus Tract Study, Radiological Supervision And Interpretation	\$32.99 \$64.59
	Imaging Of Surgical Specimen	\$28.55
76100	Radiologic Examination, Single Plane Body Section (Eg, Tomography), Other Than With Urography	\$86.90
	Imaging Of Organ	\$112.74
	Imaging Of Organ, Complimenting Routine Exam Consultation On X-Ray Examination Made Elsewhere, Written Report	\$43.41 \$17.19
	Medical Physics Dose Evaluation For Radiation Exposure, Including Report	\$822.72
. 51 10		Ψ022.12

Code	Description	Fee
76376	3D Rendering With Interpretation And Reporting Of Computed Tomography, Magnetic Resonance Imaging, Ultrasound, Or Other Tomographic Modality With Image Postprocessing Under Concurrent Supervision; Not Requiring Image Postprocessing On An Independent Workstatio	\$24.23
76377	3D Rendering With Interpretation And Reporting Of Computed Tomography, Magnetic Resonance Imaging, Ultrasound, Or Other Tomographic Modality With Image Postprocessing Under Concurrent Supervision; Requiring Image Postprocessing On An Independent Workstation	\$76.58
	Computed Tomography, Limited Or Localized Follow-Up Study	\$209.46
	Magnetic Resonance Spectroscopy	\$428.45
	Magnetic Resonance (Eg, Vibration) Elastography	\$229.80
	Fluoroscopic Procedure Unlisted Computed Tomography Procedure (Eg, Diagnostic, Interventional)	\$42.07 Price By Repor
	Unlisted Computed Torriography Trocedure (Eg, Diagnostic, Interventional)	Price By Repor
	Unlisted Diagnostic Radiographic Procedure	Price By Repor
	Ultrasound Of Brain	\$101.58
	Ultrasound Of Eye Tissue And Structures	\$66.6
	Ultrasound Of Eye Disease Or Growth Ultrasound Of Eye Disease, Growth, Or Structure	\$54.19 \$50.76
	Ultrasound Of Eye Using Water Bath Method	\$80.92
	Ophthalmic Ultrasound, Echography, Diagnostic; Corneal Pachymetry, Unilateral Or Bilateral (Determination Of Corneal Thickness)	\$11.88
	Ophthalmic Biometry By Ultrasound Echography, A-Scan;	\$44.37
	Ophthalmic Biometry By Ultrasound Echography, A-Scan; With Intraocular Lens Power Calculation	\$60.63
	Ultrasound Of Eye Foreign Body Localization	\$82.65
	Ultrasound Of Head And Neck Ultrasound Of Chest	\$95.29 \$62.00
	Ultrasound Of One Breast, Complete	\$111.46
	Ultrasound Of One Breast, Limited	\$91.1
	Ultrasound Of Abdomen, Complete	\$134.44
	Ultrasound Of Abdomen, Limited	\$97.68
	Ultrasound Evaluation Of Abdominal Aorta To Detect Bulging (Aneurysm) Ultrasound, Retroperitoneal (Eg, Renal, Aorta, Nodes), B-Scan And/Or Real Time With Image Documentation; Complete	\$100.97 \$117.63
	Ultrasound Behind Abdominal Cavity, Limited	\$61.68
	Ultrasound Transplated Kidney	\$143.0
76800	Ultrasound, Spinal Canal And Contents	\$129.19
	Ultrasound, Pregnant Uterus, Real Time With Image Documentation, Fetal And Maternal Evaluation, First Trimester (14 Weeks 0 Days),	*
76801	Transabdominal Approach; Single Or First Gestation Ultrasound, Pregnant Uterus, Real Time With Image Documentation, Fetal And Maternal Evaluation, First Trimester (14 Weeks 0 Days),	\$151.31
76802	Transabdominal Approach; Each Additional Gestation (List Separately In Addition To Code For Primary Procedure)	\$76.49
	Abdominal Ultrasound Of Pregnant Uterus (Greater Or Equal To 14 Weeks 0 Days) Single Or First Fetus	\$151.3
76810	Abdominal Ultrasound Of Pregnant Uterus (Greater Or Equal To 14 Weeks 0 Days)	\$112.10
76811	Ultrasound, Pregnant Uterus, Real Time With Image Documentation, Fetal And Maternal Evaluation Plus Detailed Fetal Anatomic Examination, Transabdominal Approach; Single Or First Gestation	\$278.1
76812	Ultrasound, Pregnant Uterus, Real Time With Image Documentation, Fetal And Maternal Evaluation Plus Detailed Fetal Anatomic Examination, Transabdominal Approach; Each Additional Gestation (List Separately In Addition To Code For Primary Procedure)	\$168.08
	Ultrasound Of Pregnant Uterus (First Trimester) Single Or First Fetus	\$138.5
	Ultrasound Of Pregnant Uterus (First Trimester), Abdominal Or Vaginal Approach	\$91.2
	Ultrasound Of Pregnant Uterus, 1 Or More Fetus(Es)	\$101.1
	Ultrasound Re-Evaluation Of Pregnant Uterus, Per Fetus Vaginal Ultrasound Of Pregnant Uterus	\$100.8 \$110.9
	Fetal Biophysical Profile; With Non-Stress Testing	\$130.1
	Fetal Biophysical Profile; Without Non-Stress Testing	\$117.09
76820	Doppler Velocimetry, Fetal; Umbilical Artery	\$53.0°
76821	Doppler Velocimetry, Fetal; Middle Cerebral Artery	\$101.65
76825	Echocardiography, Fetal, Cardiovascular System, Real Time With Image Documentation (2D) With Or Without M-Mode Recording;	\$188.5
70000	Echocardiography, Fetal, Cardiovascular System, Real Time With Image Documentation (2D) With Or Without M-Mode Recording; Follow-Up	¢442.44
	Or Repeat Study Doppler Echocardiography, Fetal, Pulsed Wave And/Or Continuous Wave With Spectral Display; Complete	\$113.46 \$110.9
10021	Doppler Echocardiography, Fetal, Cardiovascular System, Pulsed Wave And/Or Continuous Wave With Spectral Display; Follow-Up Or Repeat	ψ110.5
	Study	\$83.8
	Ultrasound, Transvaginal	\$107.8
	Saline Infusion Sonohysterography (Sis), Including Color Flow Doppler, When Performed Ultrasound Of Pelvis, Complete, Not Pregnancy Related	\$128.1 \$107.8
	Ultrasound Of Pelvis, Limited, Not Pregnancy Related	\$50.8
	Ultrasound Of Scrotum	\$104.6
	Ultrasound Of Pelvic Region Through Rectum	\$107.5
	Ultrasound Of Prostate Through Rectum For Radiation Therapy Planning	\$190.4
	Complete Ultrasound Of Arm Or Leg Partial Ultrasound Of Joint Or Other Non-Blood Vessel Structure Of Arm Or Leg	\$62.5 \$43.1
	Comprehensive Ultrasound Scan Of Entire Length Of Nerves In Extremity	\$64.2
	Ultrasound Of Hips With Manipulation, Infant	\$110.9
	Ultrasound Of Hips, Infant	\$101.9
	Ultrasonic Guidance For Endomyocardial Biopsy, Imaging Supervision And Interpretation Litrasound Guidad Compression Repair Of Blood Vessel	\$93.25
16936	Ultrasound Guided Compression Repair Of Blood Vessel	\$250.8
	Ultrasound Guidance For Vascular Access Requiring Ultrasound Evaluation Of Potential Access Sites, Documentation Of Selected Vessel Patency, Concurrent Realtime Ultrasound Visualization Of Vascular Needle Entry, With Permanent Recording And Reporting (Lis	\$36.5
76940	Ultrasound Guidance For, And Monitoring Of, Visceral Tissue Ablation	\$100.6

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	Description Literappie Guidance For Introducing Fotal Transfusion Or Cordeceptoric Imaging Supervision And Interpretation	Fee
76941	Ultrasonic Guidance For Intrauterine Fetal Transfusion Or Cordocentesis, Imaging Supervision And Interpretation	\$67.55
76942	Ultrasonic Guidance For Needle Placement (Eg, Biopsy, Aspiration, Injection, Localization Device), Imaging Supervision And Interpretation	\$61.31
	Ultrasonic Guidance For Chorionic Villus Sampling, Imaging Supervision And Interpretation	\$106.72
	Ultrasonic Guidance For Amniocentesis, Imaging Supervision And Interpretation	\$34.04
76948	Ultrasonic Guidance For Aspiration Of Ova, Imaging Supervision And Interpretation	\$77.52
76965	Ultrasonic Guidance For Interstitial Radioelement Application	\$98.02
	Gastrointestinal Endoscopic Ultrasound, Supervision And Interpretation	\$99.79
	Ultrasound Measurement Of Bone Density	\$7.16
	Ultrasound Using Targeted Microbubble Contrast Of First Lesion	\$290.01
	Ultrasound Using Targeted Microbubble Contrast Of Additional Lesion	\$192.54
	Elastography Ultrasound Of Organ Tissue	\$116.34
	Elastography Ultrasound Of First Lesion	\$91.15
	Elastography Ultrasound Of Additional Lesion	\$59.21
76984	Ultrasound Of Chest Aorta During Surgery	Price By Report
70007	Ultrasound Of Heart During Surgery To Evaluate For Congenital Heart Disease, Including Placement And Manipulation Of Transducer, Image	Date of Deep Deep and
76987	Acquisition, And Interpretation And Report Of Results Ultrasound Of Heart During Surgery To Evaluate For Congenital Heart Disease, Including Placement And Manipulation Of Transducer And	Price By Report
76000	Image Acquisition	Drice By Deport
	Ultrasound Of Heart During Surgery To Evaluate For Congenital Heart Disease, Interpretation And Report Of Results Only	Price By Report Price By Report
	Ultrasonic Guidance Interoperative	\$162.07
	Unlisted Ultrasound Procedure (Eg, Diagnostic, Interventional)	·
	Fluoroscopic Guidance For Insertion, Replacement Or Removal Of Central Venous Access Device	Price By Report \$112.98
	Fluoroscopic Guidance For Insertion, Replacement of Removal of Central Ventius Access Device	\$88.91
	Fluoroscopic Guidance For Injection Into Spine Or Muscle Next To Spine	\$91.29
	Ct Guidance Stereotactic Localization	\$243.50
	Ct Needle Placement	\$152.06
	Ct Tissue Ablation	\$191.14
	Ct Radiation Therapy Fields	\$128.90
	Radiological Supervision And Interpretation Of Mri Guidance For Insertion Of Needle	\$418.09
	Mri Guidance For Destruction Of Tissue	\$217.12
77046	Mri Of One Breast	\$217.31
77047	Mri Of Both Breasts	\$247.99
77048	Mri Of One Breast With And Without Contrast	\$344.75
77049	Mri Of Both Breasts With And Without Contrast	\$390.80
77053	Mammary Ductogram Single Duct	\$57.07
77054	Mammary Ductogram Multiple Ducts	\$66.39
77061	Digital Tomography Of One Breast	Price By Report
	Digital Tomography Of Both Breasts	Price By Report
77063	Screening Digital Tomography Of Both Breasts	\$55.73
	Diagnostic Mammography Of One Breast	\$89.39
	Diagnostic Mammography Of Both Breasts	\$115.48
	Screening Mammography Of Both Breasts	\$95.52
	Contralateral Joint If Indicated	\$38.31
	Bone Age Studies	\$27.87
	Bone Length Studies	\$51.21
	Radiologic Exam Osseous Survey Limited	\$70.35
	X-Ray Survey Of Forearm Or Wrist Bone Density	\$94.35
	X-Ray Survey Of Bones, Infant	\$75.96
	Imaging Of 2 Or More Joints, Single View	\$50.16 \$144.05
	Ct Scan Bone Mineral Density Study 1 Or More Sites	\$141.05
	Bone Density Measurement Of The Core Or Central Skeleton (E.G., Hips, Pelvis, Spine) Bone Density Measurement Of The Core Or Extremities (E.G., Radius, Wrist, Heel)	\$39.49
	Bone Density Measurement Of The Core Of Extremities (E.G., Radius, Wrist, Heel) Mri Bone Marrow Blood Supply	\$29.66 \$490.48
	Bone Density Measurement Of The Core Or Central Skeleton (E.G., Hips, Pelvis, Spine), Including Assessment Of Vertebral Fracture	\$54.39
	Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement	\$31.30
	Calculation Of Trabecular Bone Score (Tbs) Using Imaging Data With Interpretation And Report On Fracture Risk	\$31.30
	Technical Preparation And Transmission Of Imaging Data For Analysis Of Trabecular Bone Score (Tbs) Performed Elsewhere	\$2.25
	Technical Calculation Of Trabecular Bone Score (Tbs)	\$25.43
		Ψ20.40
	Interpretation Of Trabecular Bone Score (Tbs) And Report On Fracture Risk	\$8.65
77092	Interpretation Of Trabecular Bone Score (Tbs) And Report On Fracture Risk Management Of Radiation Therapy, Simple	\$8.65 \$73.45
77092 77261	Interpretation Of Trabecular Bone Score (Tbs) And Report On Fracture Risk Management Of Radiation Therapy, Simple Management Of Radiation Therapy, Intermediate	\$8.65 \$73.45 \$100.45
77092 77261 77262	Management Of Radiation Therapy, Simple	\$73.45
77092 77261 77262 77263	Management Of Radiation Therapy, Simple Management Of Radiation Therapy, Intermediate	\$73.45 \$100.45
77092 77261 77262 77263 77280	Management Of Radiation Therapy, Simple Management Of Radiation Therapy, Intermediate Management Of Radiation Therapy, Complex	\$73.45 \$100.45 \$173.31
77092 77261 77262 77263 77280 77285	Management Of Radiation Therapy, Simple Management Of Radiation Therapy, Intermediate Management Of Radiation Therapy, Complex Management Of Radiation Therapy Simulation, Simple	\$73.45 \$100.45 \$173.31 \$190.45
77092 77261 77262 77263 77280 77285 77290	Management Of Radiation Therapy, Simple Management Of Radiation Therapy, Intermediate Management Of Radiation Therapy, Complex Management Of Radiation Therapy Simulation, Simple Management Of Radiation Therapy, Simulation, Intermediate	\$73.45 \$100.45 \$173.31 \$190.45 \$429.08
77092 77261 77262 77263 77280 77285 77290 77293	Management Of Radiation Therapy, Simple Management Of Radiation Therapy, Intermediate Management Of Radiation Therapy, Complex Management Of Radiation Therapy Simulation, Simple Management Of Radiation Therapy, Simulation, Intermediate Management Of Radiation Therapy, Simulation, Complex	\$73.45 \$100.45 \$173.31 \$190.45 \$429.08 \$372.18
77092 77261 77262 77263 77280 77285 77290 77293 77295	Management Of Radiation Therapy, Simple Management Of Radiation Therapy, Intermediate Management Of Radiation Therapy, Complex Management Of Radiation Therapy Simulation, Simple Management Of Radiation Therapy, Simulation, Intermediate Management Of Radiation Therapy, Simulation, Complex Respiratory Motion Management Simulation	\$73.45 \$100.45 \$173.31 \$190.45 \$429.08 \$372.18
77092 77261 77262 77263 77280 77285 77290 77293 77295 77299	Management Of Radiation Therapy, Simple Management Of Radiation Therapy, Intermediate Management Of Radiation Therapy, Complex Management Of Radiation Therapy Simulation, Simple Management Of Radiation Therapy, Simulation, Intermediate Management Of Radiation Therapy, Simulation, Complex Respiratory Motion Management Simulation Management Of Radiation Therapy, 3D	\$73.45 \$100.45 \$173.31 \$190.45 \$429.08 \$372.18 \$374.63 \$501.20
77092 77261 77262 77263 77280 77285 77290 77293 77299 77300	Management Of Radiation Therapy, Simple Management Of Radiation Therapy, Intermediate Management Of Radiation Therapy, Complex Management Of Radiation Therapy Simulation, Simple Management Of Radiation Therapy, Simulation, Intermediate Management Of Radiation Therapy, Simulation, Intermediate Management Of Radiation Therapy, Simulation, Complex Respiratory Motion Management Simulation Management Of Radiation Therapy, 3D Management Of Radiation Therapy, Therapeutic Radiology Basic Radiation Dosimetry Calculation, Central Axis Depth Dose Calculation, Tdf, Nsd, Gap Calculation, Off Axis Factor, Tissue Inhomogeneity Factors, Calculation Of Non-Ionizing Radiation Surface And Depth Dose, As Required During Course Of Treatment,	\$73.45 \$100.45 \$173.31 \$190.45 \$429.08 \$372.18 \$374.63 \$501.20 Price By Report
77092 77261 77262 77263 77280 77285 77290 77293 77295 77299 77300	Management Of Radiation Therapy, Simple Management Of Radiation Therapy, Intermediate Management Of Radiation Therapy, Complex Management Of Radiation Therapy Simulation, Simple Management Of Radiation Therapy, Simulation, Intermediate Management Of Radiation Therapy, Simulation, Intermediate Management Of Radiation Therapy, Simulation, Complex Respiratory Motion Management Simulation Management Of Radiation Therapy, 3D Management Of Radiation Therapy, 3D Management Of Radiation Therapy, Therapeutic Radiology Basic Radiation Dosimetry Calculation, Central Axis Depth Dose Calculation, Tdf, Nsd, Gap Calculation, Off Axis Factor, Tissue Inhomogeneity Factors, Calculation Of Non-Ionizing Radiation Surface And Depth Dose, As Required During Course Of Treatment, Intensity Modulated Radiotherapy Plan, Including Dose-Volume Histograms For Target And Critical Structure Partial Tolerance Specifications	\$73.45 \$100.45 \$173.31 \$190.45 \$429.08 \$372.18 \$374.63 \$501.20 Price By Report
77092 77261 77262 77263 77280 77285 77290 77293 77295 77299 77300 77301	Management Of Radiation Therapy, Simple Management Of Radiation Therapy, Intermediate Management Of Radiation Therapy, Complex Management Of Radiation Therapy Simulation, Simple Management Of Radiation Therapy, Simulation, Intermediate Management Of Radiation Therapy, Simulation, Intermediate Management Of Radiation Therapy, Simulation, Complex Respiratory Motion Management Simulation Management Of Radiation Therapy, 3D Management Of Radiation Therapy, Therapeutic Radiology Basic Radiation Dosimetry Calculation, Central Axis Depth Dose Calculation, Tdf, Nsd, Gap Calculation, Off Axis Factor, Tissue Inhomogeneity Factors, Calculation Of Non-Ionizing Radiation Surface And Depth Dose, As Required During Course Of Treatment,	\$73.45 \$100.45 \$173.31 \$190.45 \$429.08 \$372.18 \$374.63 \$501.20 Price By Report

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7315 Radiation Therapy Part No. Complex For Insention Of Radiatories Impaired 7321 Special Dischargery For Part Part Parts (1964). Horizontal Polystein 7321 Special Dischargery For Parts (1964). Here Index (1964). Here Ind		Description Radiation Therapy Plan Intermediate For Insertion Of Radioactive Implant	Fee \$200.07
77213 Special Contentracy Port Plann Particles, Hermitode, Total Body 77233 Special Contentry (6, TeM, Mondermary) (Specialy), New York Prescribed by The Treating Physician 5027 77233 Caldistion Treatment Devess, Design And Continuous, Semple 5027 77233 Caldistron Treatment Devess, Design And Continuous, Semple 5027 77233 Caldistron Treatment Devess, Design And Continuous, Correlate 77237 Special Medical Redistron Physics Consultation 77237 Caldistron Treatment Devess, Design Continuous, Continuou		· ·	
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77333 Radiation Treatment Devices, Design And Contraction, Intermediate 77336 And Relation Treatment Devices, Design And Construction, Complex 7736 Part Treatment Devices, Design And Construction, Complex 77376 Radiation Treatment Devices, Design And Construction Complex 77377 Radiation Treatment Devices, Design And Construction Fee Intern Plan 77377 Radiation Treatment Devices, Design And Construction Residence of Part Medical Relations (Part Medical Residence) 77377 Radiation Treatment Devices, Supercontact Radiatiouspray (Str.) For Craimal Growths, Part Session, Using Multi-Source Radiationspray 77377 Radiation Treatment Devices, Supercontact Radiatiouspray (Str.) For Craimal Growths, Part Session, Using A Linear Accelerator 77377 Supercontact Body Residence Radiatiouspray (Str.) For Craimal Growths, Part Session, Using A Linear Accelerator 77377 Supercontact Body Residence Radiatiouspray (Str.) For Craimal Growths, Part Session, Using A Linear Accelerator 77377 Supercontact Body Residence Radiatiouspray (Str.) For Craimal Growths, Part Session, Using A Linear Accelerator 77377 Supercontact Body Residence Radiations (Part Part Medical Radiation Part Part Part Residence (Part Part Part Residence Part Part Part Part Part Residence Part Part Part Part Part Part Residence Part Part Part Part Part Part Part Part			\$60.74
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77339 Orlinion Treatment Documentation in Support Of The Radiation Oncologial, Reponted Pet Week Of Therapy 7737 (Sandhard Michael Padaton Physics Consultation 7737) Secol Medical Radiation Physics Consultation 7737 (Sandhard Physics Consultation 7737) Resident Physics Consultation 7737) Resident Physics Consultation 7737 (Resident Physics Consultation 7737) Resident Physics Consultation 7737) Resident Physics Consultation 7737 (Resident Physics Consultation 7737) Resident Physics Consultation 7737) Resident Physics Consultation 7738 (Resident Physics Consultation) 7738 (Resident Physics Consultation) 7739 (Resident Physics Consulta		, ,	\$124.69
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77371 Radiation Therapy Delwey, Stereotacke Radiosurgery (Ste) For Cranial Growths, Per Season, Using Allines Survey Radiotherapy 1924.6 77372 Stereotactic Body Radiotion Therapy 1 Or Mont Lesions Using Impaging Giustinon 3972.2 77373 Stereotactic Body Radiotion Therapy 1 Or Mont Lesions Using Impaging Giustinon 3530.0 77377 Stereotactic Body Radiotion Therapy Chelwey, Stereotactic Radiosurgery (Stereotactic Body Radiotion Therapy Chelwey, Stereotactic Radiotion Therapy Chelwey, Stereotactic Radiotion Therapy Chelwey (Stereotactic Radiotion Therapy Chelwey) (Stereotactic Radiotion Therapy Chelwey) (Stereotactic Radiotion Therapy Chelwey) (Stereotactic Radiotion Therapy Chelwey) (Stereotactic Radiotion Therapy Montagement Chelwey), Stereotactic Radiotion Therapy (Stereotactic Radiotion Therapy Chelwey) (Stereotactic Radiotion Therapy Chelwey) (Stereotactic Radiotion Therapy Radiotion Therapy Chelwey) (Stereotactic Radiotion Therapy Radiotion Therapy Chelwey) (Stereotactic Radiotion Therapy Radiotion Therapy Radiotion Therapy Radiotion Therapy Radiotion Therapy Radiotion Therapy (Stereotactic Radiotion Therapy (Stereotactic Radiotion Therapy Radiotion Radiotion Radiotion Therapy Radiotion Radiotion Radiotion Radiotion Radiotion Radiotion Radi			\$483.28
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77339 Intensity Muchalacide Radiation Therapy Delivery, Complex \$310.0 77389 Intensity Muchalacide Radiation Treating Delivery, Complex \$310.0 77387 Guidance For Localization Of Target Delivery Of Radiation Physics Price By Report 77401 Radiation Treatment Chelvery, Superficial \$34.0 77401 Radiation Treatment Delivery, Superficial \$30.0 77417 Radiation Treatment Delivery, Superficial \$30.0 77417 Radiation Treatment Delivery, Complex \$62.3 77417 Treatment Radiation Presented Pelvery, Superficial \$12.2 77417 Treatment Radiation Presented Pelvery, Superficial \$12.3 77417 Treatment Radiation Presented Delivery, Complex \$2.0 77420 Intraception Rediation Treatment Delivery, Karp, Single Treatment Season Price By Report 77420 Price Delivery of Single Season Of Intraception Rediation Treatment Delivery, Single Season of Intraception Treatment Rediation			
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77401 Radiation Treatment Delivery, Simple \$9.82 77402 Radiation Treatment Delivery, Intermediate \$742 77402 Radiation Treatment Delivery, Intermediate \$742 77413 Radiation Treatment Delivery, Compix \$742 77417 Radiation Treatment Delivery, Compix \$742 77417 Radiation Treatment Delivery, High Energy \$742 77417 Radiation Treatment Delivery, High Energy \$742 7742 Radiation Treatment Delivery, High Energy \$742 7742 Radiation Treatment Management, 17 Carl Treatment Sension \$742 7742 Radiation Treatment Management, 17 Carl Treatments \$742 7743 7744 Radiation Treatment Management, 17 Carl Treatments \$744 7745 Radiation Treatment Management, 17 Carl Treatments \$744 7745 Radiation Treatment Management, 17 Carl Treatments \$745 80 Restoration Radiation Treatment Management Of Treatment Management Of Radiation Treatment Participation Radiation Treatment Participation Radiation Treatment Radiation Treatment Management Of Radiation Treatment Radiation Tr	77387	Guidance For Localization Of Target Delivery Of Radiation Treatment	\$116.72
Section Sect	77399	Management Of Radiation Therapy, Medical Radiation Physics	Price By Report
7740 Radation Treatment Delivery, Intermediate 7742 Radation Treatment Delivery, Compix 7742 Radation Treatment Delivery, Compix 7742 Radation Treatment Delivery, September 1974 Radation Treatment Delivery, High Energy 7742 Radation Treatment Delivery, High Energy 7742 Radation Treatment Delivery, High Energy 7742 Radation Treatment Delivery, Assay, Single Treatment Session 7742 Radation Treatment Management, S. Treatment Will Execute Beam Price By Report 7742 Radation Treatment Management, S. Treatment Will Execute Beam Price By Report 7743 Sterostack, Radation Treatment Management Of Radation Service 77443 Sterostack, Radation Treatment Management Of Radation Treatment Pairs of Radation Treatment Management of Radation Treatment Pairs of Radation Treatment Rad	77401	Radiation Treatment Delivery, Superficial	\$39.68
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77428 Radiation Treatment Delivery, High Energy \$246.0 77428 Introperative Radiation Treatment Delivery, X-Ray, Single Treatment Session Price By Report 77427 Radiation Treatment Management, 3 Treatments \$2019 77437 Standard Radiation Treatment Management of David Lesions, Complete Course Of Treatment Consisting Of 1 Session \$4374 77438 Steroclacitic Radiation Treatment Management Of 1 Or More Lesions Using Imaging Guidance, Per Treatment Course \$660.1 77440 Britan Steroclacitic Radiation Treatment Management Of 1 Or More Lesions Using Imaging Guidance, Per Treatment Course \$660.1 77440 Britan Steroclacitic Radiation Treatment Management Of Steroclacitic Radiation Treatment Delivery, Simple \$162.2 77450 Initiated Management Of Radiation Therapy Price By Report 77520 Priction Treatment Delivery, Simple Vith Compensation Price By Report 77522 Priction Treatment Delivery, Simple Vith Compensation Price By Report 77523 Priction Treatment Delivery, Simple Vith Compensation \$162.4 77524 Priction Treatment Delivery, Simple Vith Complex Complex \$162.6 77525 Priction Treatment Delivery, Simple Vith Complex Complex \$162.6			\$82.92
77422 Interportative Radiation Treatment Delivery, X-Ray, Single Treatment Session Price By Repo 77425 Delevary O'Single Session O'Intraoperative Radiation Treatment Will Electron Beam Price By Repo 77427 Radiation Treatment Management, 1 o' Tareatments \$2019 87431 Radiation Treatment Management of D' Frain Lesions, Complete Course O' Treatment Consisting O' I Session \$382 77432 Stereotockic Radiation Treatment Management O' I o' More Lesions Using Imaging Gudance, Per Treatment Course \$660.1 77440 Intraoperative Radiation Treatment Management O' I o' More Lesions Using Imaging Gudance, Per Treatment Course \$660.1 77450 Special Treatment Delivery, Strain (E.), Total Book Jirradiation, Hernbody Radiation, Per Oral O' Endocavitary Irradiation) \$1422 77490 Special Treatment Delivery, Simple \$262.5 77502 Proton Treatment Delivery, Simple Will Compensation \$262.3 77503 Proton Treatment Delivery, Complex \$262.3 77504 Pyperthermia, Estreating Generated Superficial (Re. Heating To Depth Greater Than 4 Cm) \$663.6 77505 Pyperthermia, Estreating Generated Deep (Re. Heating To Depth Greater Than 4 Cm) \$663.6 77510 Pyperthermia Terrainer, Sort Frewer Probe Applications \$15,043.3 77760 Intriaon O' Trial Strain Treatment, Sort Frewer Probe Applications \$16,043.3 77761 Intrian		, ,,	
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7/42/I. Radiation Treatment Management, 1 or 2 treatments \$80.5 7/43/I. Statistion Treatment Management, 1 or 2 treatments \$82.7 7/43/I. Steroclacic Radiation Treatment Management of 1 or More Learners \$60.7 7/45/I. Steroclacic Radiation Treatment Management of 1 or More Learners \$60.7 7/47/I. Special reatment Developer (Eg. Total Body Treatment) \$142.2 7/49/I. Post Treatment Developer (Eg. Total Body Treatment) \$142.2 7/49/I. Post Treatment Developer (Simple With Compensation) Price By Report Treatment Developer (Simple With Compensation) 7/552/Potion Treatment Developer (Simple With Compensation) Price By Report Treatment Developer (Simple With Compensation) Price By Report Treatment Developer (Simple With Compensation) 7/552/Potion Treatment Developer (International Compensation) Price By Reportmentia, Externally Generated Deep (Ie., Heating To A Depth C/I 4 Cm Or Less) Price By Reportmentia, Externally Generated Deep (Ie., Heating To Depths Greater Than 4 Cm) \$393.4 7/560/Pyperthermia, Externally Generated Superincial (Ie., Heating To A Depth C/I 4 Cm Or Less) \$49.13 7/561/Pyperthermia Treatment, 5 Or More Probe Applications \$1.04 7/561/Pyperthermia Treatment, 5 Or More Probe Applications \$1.04 <td< td=""><td></td><td></td><td></td></td<>			
77431 Radiation Treatment Management, 1 or 2 Treatments \$852.7 77432 Stereotic Radiation Treatment Management of 1 or More Lesions Using Imaging Guidance, Per Treatment Course \$660.1 77435 Stereotic Radiation Treatment Management of 1 or More Lesions Using Imaging Guidance, Per Treatment Course \$660.1 774769 Intracerusive Radiation Treatment Management of Carlos Body Irradiation, Hembody Radiation, Per Oral Or Endocavitary Irradiation Price By Report Price By Report Price By Report Price By Report Prices Dy Report P		, , ,	\$201.93
77432 Sheredraciic Radiation Treatment Management Of 10 r More Lesions, Complete Course Of Treatment Course \$680.1 77458 Birescaciic Radiation Treatment Management \$295.1 77470 Special Treatment Proceeding (Eg. Total Body) Underline (Hanagement) \$1412.2 77490 Picilis Treatment Potewing (Eg. Total Body) Underline (Hanagement) Price By Repo 77520 Proton Treatment Dekwey, Simple With Compensation Price By Repo 77522 Proton Treatment Dekwey, Intermediate \$2324.2 77523 Proton Treatment Dekwey, Intermediate \$2324.7 77523 Proton Treatment Dekwey, Intermediate \$2824.7 77523 Proton Treatment Dekwey, Intermediate \$2824.7 77520 Pryce Proton Treatment Dekwey, Intermediate \$2824.7 77520 Pryce Proton Treatment Dekwey, Intermediate \$4913.3 77520 Pryce Proton Treatment Dekwey, Intermediate \$4913.3 77520 Pryce Proton Treatment Dekwey, Complex Price By Reportmentia, Externally Generated Deep (le, Heating To A Paph) Of 4 Cm Or Less) \$4913.3 77520 Pryce Pryce Proton Treatment Treatment, Scannally Generated Deep (le, Heating To A Paph) Of 4 Cm Or Less) \$4913.3 77520 Pryce Pryce Proton Treatmen			\$86.24
Tr458 Intraperative Radiation Treatment Management Of 1 of More Lesions Using Imaging Guidance, Per Treatment Course \$285.			\$437.43
77470 Special Treatment Procedure (Eg. Total Body Irradiation, Hembody Radiation, Per Onal Or Endocavitary Irradiation) Process Per Proces	77435	Stereotactic Radiation Treatment Management Of 1 Or More Lesions Using Imaging Guidance, Per Treatment Course	\$660.19
Price By Report Price By R	77469	Intraoperative Radiation Treatment Management	\$295.18
Prizos Proton Treatment Delivery, Simple \$323.7 Prizos Pricos Treatment Delivery, Simple With Compensation Price By Repo \$329.7 Prizos Pricos Treatment Delivery, Intermediate \$329.7 Prizos Prizos Treatment Delivery, Intermediate Price By Repo \$329.7 Prizos Prizos Treatment Delivery, Complex Price By Repo \$329.7 Prizos Pri			\$142.24
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77610 Hyperthermia Treatment, 5 Or Fewer Probe Applications \$1,048.3 77615 Hyperthermia Treatment, 5 Or More Probe Applications \$1,048.3 77620 Hyperthermia Generated By Intracavitary Probe(S) \$262.6 77751 Institution Of Institution Of Radiolement Solution, Includes 3-Month Follow-Up Care \$389.7 77761 Application Of Organ Cavity Radiation Source, Intermediate \$514.0 77763 Application Of Organ Cavity Radiation Source, Intermediate \$723.4 77767 High Dose Brachytherapy Through Skin Surface, 1 Channel Or Up To 2.0 Cm \$236.6 77767 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm \$387.3 77770 High Dose Brachytherapy, 1 Channel \$352.5 77771 High Dose Brachytherapy, 2.1 Channel \$352.5 77772 High Dose Brachytherapy, 2.2 12 Channels \$565.6 77772 High Dose Brachytherapy, 3.2 Than 12 Channels \$387.7 77772 High Dose Brachytherapy, More Than 12 Channels \$387.7 77778 High Dose Brachytherapy, More Than 12 Channels \$387.7 77778 Suprison, Handling, Loading Of Radiation \$1262.8 77789 Suprison, Handling, Loading Of Radiation \$15.4 77789 Suprison, Handling, Loading Of Radiation \$15.4 78012 Thyroid Uptake Measurements \$36.5 <			\$963.50
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77756 Infusion Or Instillation Of Radioelement Solution, Includes 3-Month Follow-Up Care \$361.7 77761 Application Of Organ Cavity Radiation Source, Simple \$31.6 77762 Application Of Organ Cavity Radiation Source, Intermediate \$31.4 77763 Application Of Organ Cavity Radiation Source, Complex \$722.4 77766 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm \$387.7 77770 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm \$387.7 77771 High Dose Brachytherapy, 1 Channels \$352.5 77777 High Dose Brachytherapy, 2-2 12 Channels \$352.5 77777 High Dose Brachytherapy, Where Than 1.2 Channels \$352.5 77777 High Dose Brachytherapy, More Than 1.2 Channels \$352.5 77778 Application Of Radiation \$352.5 77778 Application Of Radiation \$1262. 77789 Unisted Procedure, Clinical Brachytherapy Price By Repo 78011 Thyroid Uptake Measurements \$85.6 8013 Thyroid Unaging (Including Vascular Flow, When Performed); \$178.7 78014 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg. Neck And Chest Only) \$241.7 78015 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg. With Additional Studies (Eg. Urinary Recovery) \$247.2 78071 Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed \$39.7 <tr< td=""><td>77615</td><td>Hyperthermia Treatment, 5 Or More Probe Applications</td><td>\$1,048.32</td></tr<>	77615	Hyperthermia Treatment, 5 Or More Probe Applications	\$1,048.32
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777722 Application Of Organ Cavity Radiation Source, Complex \$723.4 777763 Application Of Organ Cavity Radiation Source, Complex \$723.4 777767 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm \$383.7 77776 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm \$383.7 77777 High Dose Brachytherapy, 1 Channels \$362.5 77777 High Dose Brachytherapy, 2-12 Channels \$656.6 77777 High Dose Brachytherapy, 2-12 Channels \$820.6 77777 High Dose Brachytherapy, More Than 12 Channels \$937.0 77778 Application Of Radiation Source, Complex \$820.8 7778 Supression, Handling, Loading Of Radiation \$156.7 7779 Supression, Handling, Loading Of Radiation \$156.7 7779 Supression, Handling, Loading Of Radiation \$157.8 78012 Thyroid Imaging (Including Vascular Flow, When Performed); \$178.7 78012 Thyroid Imaging (Including Vascular Flow, When Performed); \$243.8 78013 Thyroid Imaging (Including Vascular Flow \$243.8 78014 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg., With Additional Studies (Eg., Urinary Recovery) \$260.3 78017 Parathyroid Planar Imaging (Including Subtraction, When Performed); \$347.2 78071 Parathyroid Planar Imaging (In		·	\$368.79
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77772High Dose Brachytherapy , More Than 12 Channels\$937.077778Application Of Radiation Source, Complex\$20.877789Surface Application Of Radiation\$126.277790Supervision, Handling, Loading Of Radiation\$15.477799Unlisted Procedure, Clinical BrachytherapyPrice By Repo8012Thyroid Unlisted Procedure, Clinical Brachytherapy\$85.678012Thyroid Undake Measurements\$85.678013Thyroid Unaging (Including Vascular Flow, When Performed);\$178.778014Thyroid Imaging (Including Vascular Flow\$243.878015Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only)\$211.178016Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery)\$260.378017Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Addition To Code For Primary Procedure)\$484.878010Parathyroid Planar Imaging (Including Subtraction, When Performed);\$197.578011Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed78072Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed78073Adrenal Imaging; Cortex And/Or Medulla\$296.978074Bone Marrow Imaging; Limited Areas\$147.078103Bone Marrow Imaging; Whole Body\$199.778110Nuclear Medicine Study Of Plasma, Single Samplings\$66.678121Nuclear Medicine St		ů , i,	\$656.68
77778Application Of Radiation Source, Complex\$820.877778Surface Application Of Radiation\$126.277790Supervision, Handling, Loading Of Radiation\$15.477799Unlisted Procedure, Clinical BrachytherapyPrice By Repo78012Thyroid Uptake Measurements\$85.678013Thyroid Imaging (Including Vascular Flow, When Performed);\$178.778014Thyroid Imaging With Vascular Flow\$243.878015Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only)\$241.878016Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery)\$260.378017Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body\$247.278020Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)\$48.878070Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)\$357.778071Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed\$296.978075Adrenal Imaging, Cortex And/Or Medulla\$409.778090Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine\$1174.878104Bone Marrow Imaging; Withje Area\$147.078110Nuclear Medicine Study Of Plasma, Multiple Samplings\$66.278120Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample\$74.878120Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Sam			\$937.04
77789Surface Application Of Radiation\$126.277790Supervision, Handling, Loading Of Radiation\$15.477790Unlisted Procedure, Clinical BrachytherapyPrice By Repo78012Thyroid Uptake Measurements\$85.678013Thyroid Imaging (Including Vascular Flow, When Performed);\$178.778014Thyroid Imaging (Including Vascular Flow, When Performed);\$243.878015Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only)\$211.178016Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery)\$260.378017Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body\$247.278020Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)\$84.878070Parathyroid Planar Imaging (Including Subtraction, When Performed);\$197.578071Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)\$357.778072Tomography (Cl) For Anatomical Localization\$296.978073Adrenal Imaging, Cortex And/Or Medulla\$409.778103Bone Marrow Imaging; Limited Area\$147.078110Nuclear Medicine Study Of Plasma, Multiple Areas\$174.878121Nuclear Medicine Study Of Plasma, Multiple Samplings\$70.878122Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples\$74.878122Dilution Technique)\$93.4			\$820.80
77799Unlisted Procedure, Člinical BrachytherapyPrice By Repo78012Thyroid Uptake Measurements\$85.678013Thyroid Imaging (Including Vascular Flow, When Performed);\$178.778014Thyroid Imaging With Vascular Flow\$243.878015Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only)\$211.178016Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery)\$260.38018Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body\$247.278020Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)\$34.878070Parathyroid Planar Imaging (Including Subtraction, When Performed);\$197.578071Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)\$357.778072Tomography (Ct) For Anatomical Localization\$296.978073Adrenal Imaging, Cortex And/Or Medulla\$409.778099Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine\$147.078102Bone Marrow Imaging; Limited Area\$147.078103Bone Marrow Imaging; Whole Body\$190.778110Nuclear Medicine Study Of Plasma, Single Samplings\$70.878121Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples\$74.8Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-Dilution Technique)\$93.4	77789	Surface Application Of Radiation	\$126.26
78012Thyroid Uptake Measurements\$85.678013Thyroid Imaging (Including Vascular Flow, When Performed);\$178.778014Thyroid Imaging With Vascular Flow\$243.878015Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only)\$211.178016Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery)\$260.378018Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body\$247.278020Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)\$4.878070Parathyroid Planar Imaging (Including Subtraction, When Performed);\$197.578071Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)\$357.778072Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed\$296.978072Tomography (Ct) For Anatomical Localization\$296.978073Adrenal Imaging, Cortex And/Or Medulla\$409.778099Unlisted Endocrine Procedure, Diagnostic Nuclear MedicinePrice By Repo78102Bone Marrow Imaging; Whitiple Area\$147.078103Bone Marrow Imaging; Whole Body\$190.778104Nuclear Medicine Study Of Plasma, Single Samplings\$66.678111Nuclear Medicine Study Of Plasma, Multiple Samplings\$66.678120Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples\$74.878122Dilution Technique)\$93.4<		1 7 07 0	\$15.47
Thyroid Imaging (Including Vascular Flow, When Performed); Thyroid Imaging With Vascular Flow \$243.8 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only) \$211.1 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery) \$260.3 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body \$247.2 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body \$247.2 Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure) \$84.8 Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure) \$84.8 Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure) \$84.8 Thyroid Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect) Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed Thyroid Planar Imaging, Cortex And/Or Medulla \$296.9 Thyroid Carcinoma Metastases Uptake (List Separately In Addition Tomographic (Spect), And Concurrently Acquired Computed Thyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed Thyroid Planar Imaging, (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed Thyroid Planar Imaging, Cortex And/Or Medulla Thyroid Planar Imaging, Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine Thyroid Planar Imaging, Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine Thyroid Planar Imaging, Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine Thyroid Planar Imaging, Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine Thyroid Planar Imaging, Unlisted Endocrine Thyroid Pl			Price By Report
Thyroid Imaging With Vascular Flow R8015 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only) R8016 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery) R8018 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery) R8018 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body R8020 Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure) R8030 Parathyroid Planar Imaging (Including Subtraction, When Performed); R8041 Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect) R8051 Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed R8072 Tomography (Ct) For Anatomical Localization R8073 Adrenal Imaging, Cortex And/Or Medulla R8099 Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine R8099 Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine R8103 Bone Marrow Imaging; Limited Area R8104 Bone Marrow Imaging; Multiple Areas R8105 Bone Marrow Imaging; Whole Body R8106 Nuclear Medicine Study Of Plasma, Single Samplings R8107 Nuclear Medicine Study Of Plasma, Single Samplings R8108 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-P8122) Dilution Technique)			\$85.66
T8015 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only) \$211.1 78016 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery) \$260.3 78018 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure) \$84.8 78070 Parathyroid Planar Imaging (Including Subtraction, When Performed); \$197.5 78071 Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect) Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed Tomography (Ct) For Anatomical Localization \$296.9 78072 Tomography (Ct) For Anatomical Localization \$409.7 78099 Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine Price By Repo 78102 Bone Marrow Imaging; Limited Area \$1147.0 78103 Bone Marrow Imaging; Whole Body \$190.7 78110 Nuclear Medicine Study Of Plasma, Single Samplings \$190.7 78111 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume- \$293.4			\$178.79
78016Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery)\$260.378018Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body\$247.278020Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)\$84.878070Parathyroid Planar Imaging (Including Subtraction, When Performed);\$197.578071Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)\$357.7Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed\$296.978072Tomography (Ct) For Anatomical Localization\$296.978073Adrenal Imaging, Cortex And/Or Medulla\$409.778099Unlisted Endocrine Procedure, Diagnostic Nuclear MedicinePrice By Repo78102Bone Marrow Imaging; Limited Area\$147.078103Bone Marrow Imaging; Whole Body\$190.778110Nuclear Medicine Study Of Plasma, Single Samplings\$66.678111Nuclear Medicine Study Of Plasma, Multiple Samplings\$70.878121Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample\$68.2Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples\$74.8Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-\$93.4		, , ,	
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Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure) \$84.8 78070 Parathyroid Planar Imaging (Including Subtraction, When Performed); \$197.5 78071 Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect) Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed Tomography (Ct) For Anatomical Localization \$296.9 78075 Adrenal Imaging, Cortex And/Or Medulla \$409.7 78099 Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine Price By Repo 78102 Bone Marrow Imaging; Limited Area \$147.0 78103 Bone Marrow Imaging; Multiple Areas \$1174.8 78104 Bone Marrow Imaging; Whole Body \$190.7 78110 Nuclear Medicine Study Of Plasma, Single Samplings \$266.6 78111 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-78122) Dilution Technique)			
Rand Parathyroid Planar Imaging (Including Subtraction, When Performed); \$197.5			\$84.81
Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect) \$357.7 Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed \$296.9 78072 Tomography (Ct) For Anatomical Localization \$296.9 78075 Adrenal Imaging, Cortex And/Or Medulla \$409.7 78099 Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine Price By Reporation Price By Reporation \$147.0 78102 Bone Marrow Imaging; Limited Area \$147.0 78103 Bone Marrow Imaging; Multiple Areas \$174.8 78104 Bone Marrow Imaging; Whole Body \$190.7 78110 Nuclear Medicine Study Of Plasma, Single Samplings \$66.6 78111 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample \$68.2 78121 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples \$74.8 Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-Palaceutical Volume-Pal		, , , , , , , , , , , , , , , , , , , ,	\$197.56
Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed 78072 Tomography (Ct) For Anatomical Localization \$296.9 78075 Adrenal Imaging, Cortex And/Or Medulla \$409.7 78099 Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine Price By Repo Bone Marrow Imaging; Limited Area \$147.0 78102 Bone Marrow Imaging; Multiple Areas \$147.0 78103 Bone Marrow Imaging; Whole Body \$190.7 78110 Nuclear Medicine Study Of Plasma, Single Samplings \$66.6 78111 Nuclear Medicine Study Of Plasma, Multiple Samplings \$70.8 78120 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-78122) Dilution Technique) \$93.4			\$357.72
78075Adrenal Imaging, Cortex And/Or Medulla\$409.778099Unlisted Endocrine Procedure, Diagnostic Nuclear MedicinePrice By Repo78102Bone Marrow Imaging; Limited Area\$147.078103Bone Marrow Imaging; Multiple Areas\$174.878104Bone Marrow Imaging; Whole Body\$190.778110Nuclear Medicine Study Of Plasma, Single Samplings\$66.678111Nuclear Medicine Study Of Plasma, Multiple Samplings\$70.878120Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample\$68.278121Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples\$68.2Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-Patria)\$93.4			
78099Unlisted Endocrine Procedure, Diagnostic Nuclear MedicinePrice By Repo78102Bone Marrow Imaging; Limited Area\$147.078103Bone Marrow Imaging; Multiple Areas\$174.878104Bone Marrow Imaging; Whole Body\$190.778110Nuclear Medicine Study Of Plasma, Single Samplings\$66.678111Nuclear Medicine Study Of Plasma, Multiple Samplings\$70.878120Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample\$68.278121Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples\$74.8Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume- Dilution Technique)\$93.4			\$296.94
78102Bone Marrow Imaging; Limited Area\$147.078103Bone Marrow Imaging; Multiple Areas\$174.878104Bone Marrow Imaging; Whole Body\$190.778110Nuclear Medicine Study Of Plasma, Single Samplings\$66.678111Nuclear Medicine Study Of Plasma, Multiple Samplings\$70.878120Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample\$68.278121Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples\$74.8Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-Dilution Technique)\$93.4		\$ \$\tau_{\text{\color}}\$	\$409.71
78103 Bone Marrow Imaging; Multiple Areas \$174.8 78104 Bone Marrow Imaging; Whole Body \$190.7 78110 Nuclear Medicine Study Of Plasma, Single Samplings \$66.6 78111 Nuclear Medicine Study Of Plasma, Multiple Samplings \$70.8 78120 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample \$68.2 78121 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples \$74.8 Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume- 78122 Dilution Technique) \$93.4			Price By Report
78104Bone Marrow Imaging; Whole Body\$190.778110Nuclear Medicine Study Of Plasma, Single Samplings\$66.678111Nuclear Medicine Study Of Plasma, Multiple Samplings\$70.878120Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample\$68.278121Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples\$74.8Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-Dilution Technique)\$93.4			\$147.06
78110 Nuclear Medicine Study Of Plasma, Single Samplings \$66.6 78111 Nuclear Medicine Study Of Plasma, Multiple Samplings \$70.8 78120 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample \$68.2 78121 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples \$74.8 Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-78122 Dilution Technique) \$93.4			
78111 Nuclear Medicine Study Of Plasma, Multiple Samplings \$70.8 78120 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample \$68.2 78121 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples \$74.8 Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-78122 Dilution Technique) \$93.4			
78120 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample \$68.2 78121 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples \$74.8 Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-78122 Dilution Technique) \$93.4			\$70.88
78121 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples \$74.8 Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-78122 Dilution Technique) \$93.4			\$68.27
Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-78122 Dilution Technique) \$93.4		,	\$74.80
78130 Nuclear Medicine Study Of Red Blood Cell, Red Cell Survival \$120.0		, ,	\$93.44
	78130	Nuclear Medicine Study Of Red Blood Cell, Red Cell Survival	\$120.05

78140		
	Description Plant Court Of Pad Plant Call Conventation	Fee
	Nuclear Medicine Study Of Red Blood Cell, Sequestration Spleen Imaging Only, With Or Without Vascular Flow	\$106.52
		\$158.84
	Platelet Survival Study Lymphatics And Lymph Nodes Imaging	\$120.05
	Nuclear Medicine Study Of Blood And Lymphatic Systems	\$238.73 Price By Report
	Liver Imaging; Only	\$175.63
	Liver Imaging; With Vascular Flow	\$173.03
	Liver And Spleen Imaging;	\$180.87
	Liver And Spleen Imaging; With Vascular Flow	\$123.00
	Hepatobiliary System Imaging, Including Gallbladder When Present;	\$332.52
TOLLO	Hepatobiliary System Imaging, Including Gallbladder When Present; With Pharmacologic Intervention, Including Quantitative Measurement(S)	Ψ002.02
78227	When Performed	\$447.60
	Imaging Of Salivary Gland, Simple	\$162.24
	Imaging Of Salivary Gland, Complex	\$100.97
	Salivary Gland Function Study	\$99.33
78258	Esophageal Motility	\$196.90
78261	Gastric Mucosa Imaging	\$189.26
78262	Gastroesophageal Reflux Study	\$225.91
78264	Stomach Emptying Study	\$224.41
78265	Stomach Emptying And Small Bowel Transit Study	\$360.00
78266	Stomach Emptying And Small Bowel With Colon Transit Study	\$403.94
78267	Nuclear Medicine Study Of Digestive Tract, Acquisition	\$11.06
	Nuclear Medicine Study Of Digestive Tract, Analysis	\$94.41
	Acute Gastrointestinal Blood Loss Imaging	\$235.05
	Nuclear Medicine Study To Assess Protein Loss Into The Digestive Tract	Price By Report
78290	Intestine Imaging	\$222.34
78291	Peritoneal-Venous Shunt Patency Test (Eg, For Leveen, Denver Shunt)	\$241.28
78299	Unlisted Gastrointestinal Procedure, Diagnostic Nuclear Medicine	Price By Report
	Bone And/Or Joint Imaging; Limited Area	\$192.11
78305	Bone And/Or Joint Imaging, Multiple Areas	\$207.43
78306	Bone And/Or Joint Imaging, Whole Body	\$235.39
78315	Bone And/Or Joint Imaging, 3 Phase Study	\$267.00
78350	Bone Density (Bone Mineral Content) Study Single Photon Absorptiometry	\$39.70
78351	Bone Density (Bone Mineral Content) Study	\$80.45
78399	Unlisted Musculoskeletal Procedure, Diagnostic Nuclear Medicine	Price By Report
	Determination Of Central C-V Hemodynamics (Non-Imaging) (Eg, Ejection Fraction With Probe Technique) With Or Without Pharmacologic	
78414	Intervention Or Exercise, Single Or Multiple Determinations	\$24.50
78428	Cardiac Shunt Detection	\$173.26
	Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation And Concurrently Acquired Ct Transmission Scan	\$86.39
78430	Single Nuclear Medicine Study Of Blood Flow In Heart Muscle With Concurrently Acquired Ct Transmission Scan	\$81.95
	Multiple Nuclear Medicine Studies Of Blood Flow In Heart Muscle At Rest And With Stress, With Concurrently Acquired Ct Transmission Scan	\$95.22
78432	Combined Nuclear Medicine Study Of Blood Flow In Heart Muscle With Metabolic Evaluation	\$101.48
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T 78433		
	Combined Nuclear Medicine Study Of Blood Flow In Heart Muscle With Metabolic Evaluation And Concurrently Acquired Ct Transmission Scan	\$110.87
78434	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle	\$110.87 \$32.15
78434		\$110.87
78434	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle	\$110.87 \$32.15
78434 78445	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)	\$110.87 \$32.15
78434 78445	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction	\$110.87 \$32.15 \$193.32
78434 78445 78451	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre	\$110.87 \$32.15 \$193.32
78434 78445 78451 78452	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique,	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24
78434 78445 78451 78452 78453	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic)	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69
78434 78445 78451 78452 78453 78454	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94
78434 78445 78451 78452 78453 78454 78456	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81
78434 78445 78451 78452 78453 78454 78456 78457	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38
78434 78445 78451 78452 78453 78454 78456 78457 78458	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26
78434 78445 78451 78452 78453 78454 78456 78457 78458 78459	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41
78434 78445 78451 78452 78453 78454 78456 78457 78458 78459 78466	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41
78434 78445 78451 78452 78453 78454 78456 78457 78458 78466 78468	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41 \$179.13
78434 78445 78451 78452 78453 78454 78456 78457 78458 78466 78468	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41
78434 78445 78451 78452 78453 78454 78456 78457 78458 78466 78468	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41 \$179.13
78434 78445 78451 78452 78453 78454 78456 78457 78458 78466 78468	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Vein, One Leg Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Muscle Following Heart Attack, With Computer Tomography	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41 \$179.13 \$181.10 \$203.99
78434 78445 78451 78452 78453 78454 78456 78457 78458 78466 78468 78469	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Vein, Suth Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Muscle Following Heart Attack, With Computer Tomography Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, Gated Equilibrium Nuclear Medicine Study Of Heart Function Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41 \$179.13 \$181.10 \$203.99
78434 78445 78452 78453 78454 78456 78457 78458 78456 78468 78469 78462 78472	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arms Venography For Blood Clot In Vein, One Leg Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Muscle Following Heart Attack, With Computer Tomography Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, Gated Equilibrium Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, First Pass	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41 \$179.13 \$181.10 \$203.99
78434 78445 78452 78453 78454 78456 78457 78458 78459 78466 78468 78469 78472 78473	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Vein, One Leg Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Muscle Following Heart Attack, With Computer Tomography Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, First Pass Technique	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41 \$179.13 \$181.10 \$203.99
78434 78445 78452 78453 78454 78456 78457 78458 78459 78466 78468 78469 78472 78473	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arms Venography For Blood Clot In Vein, One Leg Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Muscle Following Heart Attack, With Computer Tomography Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, Gated Equilibrium Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, First Pass	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41 \$179.13 \$181.10 \$203.99
78434 78445 78451 78452 78453 78454 78456 78457 78468 78469 78472 78473 78481 78483 78491	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (le, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, Gated Equilibrium Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41 \$179.13 \$181.10 \$203.99 \$233.56 \$266.56
78434 78445 78451 78452 78453 78454 78456 78457 78468 78469 78472 78473 78481 78483 78491	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Muscle Following Heart Attack, With Computer Tomography Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, First Pass Technique Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Blood Flow In Heart Muscle Multiple Nuclear Medicine Study Of Blood Flow In Heart Muscle Multiple Nuclear Medicine Study Of Blood Flow In Heart Muscle At Rest	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41 \$179.13 \$181.10 \$203.99 \$233.56 \$266.56
78434 78445 78451 78452 78453 78454 78456 78457 78466 78469 78472 78473 78481 78491 78492	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Muscle Following Heart Attack, With Computer Tomography Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, Gated Equilibrium Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Single Nuclear Medicine Study Of Blood Flow In Heart Muscle Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Si	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41 \$179.13 \$181.10 \$203.99 \$233.56 \$266.56 \$164.10 \$224.06 \$74.78 \$94.54
78434 78445 78451 78452 78453 78454 78456 78457 78466 78469 78472 78473 78481 78491 78492	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (le, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Vein, One Leg Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, Gated Equilibrium Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Single Nuclear Medicine Stu	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41 \$179.13 \$181.10 \$203.99 \$233.56 \$266.56 \$164.10 \$224.06 \$74.78
78434 78445 78451 78452 78453 78454 78456 78457 78458 78469 78468 78469 78472 78473 78481 78483 78491 78494	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, Gated Equilibrium Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Single Nuclear Medicine Study Of Blood Flow In Heart Muscle Multiple Nuclear Medicine St	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41 \$179.13 \$181.10 \$203.99 \$233.56 \$266.56 \$164.10 \$224.06 \$74.78 \$94.54
78434 78445 78452 78453 78454 78456 78457 78458 78469 78469 78472 78473 78481 78483 78491 78494 78494	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (le, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Single Study, First Pass Technique Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple S	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41 \$179.13 \$181.10 \$203.99 \$233.56 \$266.56 \$164.10 \$224.06 \$74.78 \$94.54 \$211.51
78434 78445 78451 78452 78453 78454 78456 78457 78468 78469 78473 78481 78483 78491 78492 78494	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (le, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Mulscle Following Heart Attack, With Computer Tomography Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, First Pass Technique Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Blood Flow In Heart Muscle Nuclear Medicine Study Of Blood Flow In Heart Muscle Multiple Nuclear Medicine Study Of Blood Flow In Heart Muscle Multiple Nuclear Medicine Study Of Blood Flow In Heart Muscle Nuclear Medicine Study Of Blood Flow In Heart Muscle Multiple Nuclear Medicine Study Of Blood	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41 \$179.13 \$181.10 \$203.99 \$233.56 \$266.56 \$164.10 \$224.06 \$74.78 \$94.54 \$211.51 \$40.57 Price By Report
78434 78445 78451 78452 78453 78454 78456 78457 78466 78469 78473 78481 78491 78494 78494 78496 78499 78579	Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (le, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Single Study, First Pass Technique Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple S	\$110.87 \$32.15 \$193.32 \$243.26 \$413.24 \$271.69 \$398.94 \$288.81 \$166.38 \$190.26 \$74.41 \$179.13 \$181.10 \$203.99 \$233.56 \$266.56 \$164.10 \$224.06 \$74.78 \$94.54 \$211.51

Code	Description	Fee
	Pulmonary Ventilation (Eg, Aerosol Or Gas) And Perfusion Imaging	\$339.79
	Quantitative Differential Pulmonary Perfusion, Including Imaging When Performed	\$206.06
	Quantitative Differential Pulmonary Perfusion And Ventilation (Eg, Aerosol Or Gas), Including Imaging When Performed	\$279.54
	Unlisted Respiratory Procedure, Diagnostic Nuclear Medicine	Price By Report
	Imaging Of Brain, Less Than 4 Static Views	\$169.43
	Imaging Of Brain With Blood Flow, Less Than 4 Static Views	\$162.60
	Imaging Of Brain With Blood Flow, Minimum Of 4 Static Views Without Vascular Flow Measurement Imaging Of Brain With Blood Flow, Minimum Of 4 Static Views With Vascular Flow Measurement	\$184.47 \$221.14
	Brain Imaging, Positron Emission Tomography (Pet); Metabolic Evaluation	\$72.24
	Brain Imaging, Positron Emission Tomography (Fet), Netabolic Evaluation	\$69.01
	Imaging Of Brain, Blood Flow	\$161.14
	Cerebrospinal Fluid Flow, Imaging; Cisternography (Not Including Introduction Of Material)	\$311.05
	Cerebrospinal Fluid Flow, Imaging; Ventriculography (Not Including Introduction Of Material)	\$310.39
	Cerebrospinal Fluid Flow, Imaging; Shunt Evaluation	\$297.41
78650	Cerebrospinal Fluid Leakage Detection And Localization	\$255.77
	Radiopharmaceutical Dacryocystography	\$171.38
	Unlisted Nervous System Procedure, Diagnostic Nuclear Medicine	Price By Report
	Kidney Imaging; Only	\$157.59
	Kidney Imaging; With Vascular Flow	\$203.77
	Nuclear Medicine Study Of Kidney With Assessment Of Blood Flow And Function, Without Drugs, Single Study Nuclear Medicine Study Of Kidney With Assessment Of Blood Flow And Function, With Drugs, Single Study	\$249.73
	Nuclear Medicine Study Of Kidney With Assessment Of Blood Flow And Function, With Or Without Drugs, Multiple Studies Nuclear Medicine Study Of Kidney With Assessment Of Blood Flow And Function, With Or Without Drugs, Multiple Studies	\$185.85 \$249.22
	Kidney Function Study, Non-Imaging Radioisotopic Study	\$116.17
	Urinary Bladder Residual Study	\$69.77
	Ureteral Reflux Study (Radiopharmaceutical Voiding Cystogram)	\$200.71
	Testicular Imaging	\$195.49
78799	Unlisted Genitourinary Procedure, Diagnostic Nuclear Medicine	Price By Report
78800	Nuclear Medicine Localization Of Tumor Or Inflammation Or Study Of Distribution Of Radioactive Tracer In Single Area, 1 Day Of Imaging	\$233.21
	Nuclear Medicine Localization Of Tumor Or Inflammation Or Study Of Distribution Of Radioactive Tracer In Multiple Areas, Or In Single Area	****
78801	With Imaging Over Multiple Days	\$231.76
70002	Nuclear Medicine Localization Of Tumor Or Inflammation Or Study Of Distribution Of Radioactive Tracer In Whole Body, Single Day Imaging	\$246.13
70002	Nacieal Medicine Eccalization of Tunior of minamination of Study of Distribution of Nacionative Tracer in Whole Body, Single Bay imaging	\$240.13
78803	Spect Nuclear Medicine Localization Of Tumor Or Inflammation Or Study Of Distribution Of Radioactive Tracer In Single Area, 1 Day Of Imaging	\$295.06
	Nuclear Medicine Localization Of Tumor Or Inflammation Or Study Of Distribution Of Radioactive Tracer In Whole Body, 2 Or More Days	
78804	Imaging	\$585.12
78808	Injection Procedure For Radiopharmaceutical Localization By Non-Imaging Probe Study, Intravenous (Eg, Parathyroid Adenoma)	\$38.49
	Positron Emission Tomography (Pet) Imaging; Limited Area (Eg, Chest, Head/Neck)	\$75.54
	Positron Emission Tomography (Pet) Imaging; Skull Base To Mid-Thigh	\$93.25
78813	Positron Emission Tomography (Pet) Imaging; Whole Body	\$94.07
70044	Positron Emission Tomography (Pet) With Concurrently Acquired Computed Tomography (Ct) For Attenuation Correction And Anatomical	¢400.70
78814	Localization Imaging; Limited Area (Eg, Chest, Head/Neck) Positron Emission Tomography (Pet) With Concurrently Acquired Computed Tomography (Ct) For Attenuation Correction And Anatomical	\$106.76
78815	Localization Imaging; Skull Base To Mid-Thigh	\$4,972.87
70010	Positron Emission Tomography (Pet) With Concurrently Acquired Computed Tomography (Ct) For Attenuation Correction And Anatomical	ψ 1,01 <u>2.01</u>
78816	Localization Imaging; Whole Body	\$4,972.87
	Spect Nuclear Medicine Localization Of Tumor Or Inflammation Or Study Of Distribution Of Radioactive Tracer In Single Area, With	
78830	Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging	\$495.80
	Spect Nuclear Medicine Localization Of Tumor Or Inflammation Or Study Of Distribution Of Radioactive Tracer In Multiple Areas, Or In Single	<u>.</u>
78831	Area With Imaging Over Multiple Days	\$650.11
	Spect Nuclear Medicine Localization Of Tumor Or Inflammation Or Study Of Distribution Of Radioactive Tracer In Multiple Areas, Or In Single	
70000		0000 40
	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging	\$993.48 \$91.91
78835	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer	\$91.91
78835 78999	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine	\$91.91 Price By Report
78835 78999 79005	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration	\$91.91 Price By Report \$142.98
78835 78999 79005 79101	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine	\$91.91 Price By Report
78835 78999 79005 79101 79200	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled	\$91.91 Price By Report \$142.98 \$139.68
78835 78999 79005 79101 79200 79300	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration	\$91.91 Price By Report \$142.98 \$139.68 \$128.66
78835 78999 79005 79101 79200 79300 79403	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration	\$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99
78835 78999 79005 79101 79200 79300 79403 79440 79445	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy, Into Vein, Radiolabeled Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration	\$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$179.14 \$115.90 \$114.62
78835 78999 79005 79101 79200 79300 79403 79440 79445	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radioactive Material Therapy Into Vein, Radiolabeled Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure	\$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$179.14 \$115.90
78835 78999 79005 79101 79200 79300 79403 79440 79445 79999	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified	\$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$179.14 \$115.90 \$114.62 Price By Report
78835 78999 79005 79101 79200 79300 79403 79440 79445 79999	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radioactive Material Therapy Into Vein, Radiolabeled Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure	\$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$179.14 \$115.90 \$114.62
78835 78999 79005 79101 79200 79300 79403 79440 79445 79999	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy Into Vein, Radiolabeled Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component Of Each Vaccine Or Toxoid Administered	\$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$179.14 \$115.90 \$114.62 Price By Report
78835 78999 79005 79101 79200 79300 79403 79440 79445 79999	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radioactive Material Therapy Into Vein, Radiolabeled Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component Of Each Vaccine Or Toxoid Administration, With Counseling By Physician Or Other Qualified Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified	\$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$179.14 \$115.90 \$114.62 Price By Report
78835 78999 79005 79101 79200 79300 79403 79440 79445 79999	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy Into Vein, Radiolabeled Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component Of Each Vaccine Or Toxoid Administered	\$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$179.14 \$115.90 \$114.62 Price By Report
78835 78999 79005 79101 79200 79300 79403 79440 79445 79999 90460	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radioactive Material Therapy, By Interstitial Radioactive Colloid Administration Radioactive Material Therapy Into Vein, Radiolabeled Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component Of Each Vaccine Or Toxoid Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administered (List Separately In Addition To Co	\$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$179.14 \$115.90 \$114.62 Price By Report
78835 78999 79005 79101 79200 79300 79403 79440 79445 79999 90460	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component of Each Vaccine Or Toxoid Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administered (List Separately In Addition To Co Immunization Administration (Includes Percutaneous, Intradermal, Subcutaneous, Or Intramuscular Injections); One Vaccine (Single Or	\$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$1179.14 \$115.90 \$114.62 Price By Report \$17.17
78835 78999 79005 79101 79200 79300 79403 79440 79445 79999 90460	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component Of Each Vaccine Or Toxoid Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administered (List Separately In Addition To Co Immunization Administration (Includes Percutaneous, Intradermal, Subcutaneous, Or Intramuscular Injections); One Vaccine (Single Or Combination Vaccine/Toxoid)	\$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$1179.14 \$115.90 \$114.62 Price By Report \$17.17
78835 78999 79005 79101 79200 79300 79440 79445 79999 90460 90461 90471	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radioactive Material Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component Of Each Vaccine Or Toxoid Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine (Single Or Combination Vaccine/Toxoid) (List Separately In Addition To Co Immunization Administration By Intranasal Or Oral Route; One Vaccine (Single Or	\$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$1179.14 \$115.90 \$114.62 Price By Report \$17.17
78835 78999 79005 79101 79200 79300 79440 79445 79999 90460 90471 90472 90473	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy, By Oral Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component Of Each Vaccine Or Toxoid Administered Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administered (List Separately In Addition To Co Immunization Administration (Includes Percutaneous, Intradermal, Subcutaneous, Intramuscular Injections); One Vaccine (Single Or Combination Vaccine/Toxoid) Immunization Administration (Includes Percutaneous, Intradermal, Subcutaneous, Intramuscular And Jet Injections And/Or Intranasal Or Oral Administration); Each Additional Vaccine (Single Or Combination Vaccine/Toxoid) (List Separately In Addition To Co Immunization Administration By Intranasal Or Oral Route; One Vaccine (Single Or Combination Vaccine/Toxoid) Immunization Administration By Intranasal Or Oral Route; One Vaccine (Single Or Combination Vaccine/Toxoid) Immunization Administration By Intranasal Or Oral Route; One Vaccine (Single Or Combination Vaccine/Toxoid)	\$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$179.14 \$115.90 \$114.62 Price By Report \$17.17 \$15.58 \$11.59 \$11.59
78835 78999 79005 79101 79200 79300 79440 79445 79999 90460 90471 90472 90473	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy, By Oral Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapy and Intra-Arterial Particulate Administration (Intra-Arterial Particulate Administration (Intra-Arterial Particulate Administration Vaccine (Single Or Combination Vaccine) (Intra-Arterial Particulate Administration Parti	\$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$1179.14 \$115.90 \$114.62 Price By Report \$17.17 \$15.58 \$11.59 \$11.37 \$11.59
78835 78999 79005 79101 79200 79300 79440 79445 79999 90460 90471 90472 90473 90480 90480	Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy, By Oral Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component Of Each Vaccine Or Toxoid Administered Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administered (List Separately In Addition To Co Immunization Administration (Includes Percutaneous, Intradermal, Subcutaneous, Intramuscular Injections); One Vaccine (Single Or Combination Vaccine/Toxoid) Immunization Administration (Includes Percutaneous, Intradermal, Subcutaneous, Intramuscular And Jet Injections And/Or Intranasal Or Oral Administration); Each Additional Vaccine (Single Or Combination Vaccine/Toxoid) (List Separately In Addition To Co Immunization Administration By Intranasal Or Oral Route; One Vaccine (Single Or Combination Vaccine/Toxoid) Immunization Administration By Intranasal Or Oral Route; One Vaccine (Single Or Combination Vaccine/Toxoid) Immunization Administration By Intranasal Or Oral Route; One Vaccine (Single Or Combination Vaccine/Toxoid)	\$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$1179.14 \$115.90 \$114.62 Price By Report \$177.17 \$15.58 \$11.59 \$11.59

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	Description Pagainston, Supportial Virgo Vaccina, Brof. Pagambinant, Subunit, Adjuvanted, For Introduceular Llea	Fee
	Respiratory Syncytial Virus Vaccine, Pref, Recombinant, Subunit, Adjuvanted, For Intramuscular Use Respiratory Syncytial Virus Vaccine Mrna Lipid Nanoparticles	Price By Report Price By Report
	Psychiatric Diagnostic Evaluation	\$131.91
	Psychiatric Diagnostic Evaluation With Medical Services	\$136.20
	Psychotherapy, 30 Minutes	\$64.17
	Psychotherapy Performed With Evaluation And Management Visit, 30 Minutes	\$50.14
	Psychotherapy, 45 Minutes	\$85.44
	Psychotherapy With Evaluation And Management Visit, 45 Minutes	\$75.14
	Psychotherapy, 60 Minutes	\$127.97
	Psychotherapy With Evaluation And Management Visit, 60 Minutes	\$100.28
	Psychotherapy For Crisis, First 60 Minutes	\$113.91
90840	Psychotherapy For Crisis; Each Additional 30 Minutes (List Separately In Addition To Code For Primary Service)	\$56.95
	Psychoanalysis	\$89.97
	Family Psychotherapy, 50 Minutes	\$96.11
	Family Psychotherapy Including Patient, 50 Minutes	\$69.10
	Multiple Family Group Psychotherapy (With Patient Present); Trtmt Limited To Pymt For 40 Hrs Of Individual Psychotherapy In Combination	·
90849	W/All Other Trtmt Codes For Indep Mh Practitioners Only. Equal To 260 Units In 365-Days For Adults Only.	\$58.72
	Group Psychotherapy (Other Than Of A Multiple-Family Group); Trtmt Limited To Pymt For 40 Hrs Of Individual Psychotherapy In Combination	
90853	W/All Other Trtmt Codes For Indep Mh Practitioners Only. Equal To 260 Units In 365-Days Adults Only.	\$58.72
	Pharmacologic Management, Including Prescription And Review Of Medication, When Performed With Psychotherapy Services (List Separately	
90863	In Addition To The Code For Primary Procedure)	\$56.97
90865	Narcosynthesis For Psychiatric Diagnostic And Therapeutic Purposes (Eg, Sodium Amobarbital (Amytal) Interview)	\$156.92
	Transcranial Magnetic Stimulation Treatment (Stimulates Nerve Cells In Brain To Improve Symptoms Of Depression), Initial Delivery And	
90867	Management	\$177.09
1 7	Transcranial Magnetic Stimulation Treatment (Stimulates Nerve Cells In Brain To Improve Symptoms Of Depression), Subsequent Delivery And	
90868	Management, Per Session	\$117.23
	Transcranial Magnetic Stimulation Treatment (Stimulates Nerve Cells In Brain To Improve Symptoms Of Depression), Subsequent Motor	
	Threshold Re-Determination With Delivery And Management	\$254.79
	Electroconvulsive Therapy (Includes Necessary Monitoring)	\$121.14
	Environmental Intervention For Management Of Medical Conditions	\$15.89
90887	Explanation Of Psychiatric, Medical Examinations, Procedures, And Data To Responsible Person	\$0.01
	Unlisted Psychiatric Service Or Procedure. For 655-657 Diagnostic Assessment With Significant Others With Below Svc. Limits. Also Used For	
	School Districts Rate X 15 Min UnitsNo Service Limit.	\$32.39
	Hemodialysis Procedure With Single Evaluation By A Physician Or Other Qualified Health Care Professional	\$74.54
	Hemodialysis Procedure Requiring Repeated Evaluation(S) With Or Without Substantial Revision Of Dialysis Prescription	\$106.89
90940	Hemodialysis Access Flow Study To Determine Blood Flow In Grafts And Arteriovenous Fistulae By An Indicator Method	Price By Report
	Dialysis Procedure Other Than Hemodialysis (Eg, Peritoneal Dialysis, Hemofiltration, Or Other Continuous Renal Replacement Therapies), With	
9(1945	Single Evaluation By A Physician Or Other Qualified Health Care Professional	
		\$88.83
90947	Dialysis Procedure Requiring Repeat Evaluation	\$127.63
90947 90951	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age	\$127.63 \$1,101.61
90947 90951 90952	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age	\$127.63 \$1,101.61 \$582.61
90947 90951 90952 90953	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age	\$127.63 \$1,101.61 \$582.61 \$333.51
90947 90951 90952 90953 90954	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age	\$127.63 \$1,101.61 \$582.61 \$333.51 \$946.82
90947 90951 90952 90953 90954 90955	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age	\$127.63 \$1,101.61 \$582.61 \$333.51 \$946.82 \$490.60
90947 90951 90952 90953 90954 90955 90956	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age	\$127.63 \$1,101.61 \$582.61 \$333.51 \$946.82 \$490.60 \$325.13
90947 90951 90952 90953 90954 90955 90956 90957	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age	\$127.63 \$1,101.61 \$582.61 \$333.51 \$946.82 \$490.60 \$325.13
90947 90951 90952 90953 90954 90955 90956 90957 90958	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age	\$127.63 \$1,101.61 \$582.61 \$333.51 \$946.82 \$490.60 \$325.13 \$708.13
90947 90951 90952 90953 90954 90955 90956 90957 90958 90959	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age	\$127.63 \$1,101.61 \$582.61 \$333.51 \$946.82 \$490.60 \$325.13 \$708.13 \$475.56
90947 90951 90952 90953 90954 90955 90956 90957 90958 90959 90960	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older	\$127.63 \$1,101.61 \$582.61 \$333.51 \$946.82 \$490.60 \$325.13 \$708.13 \$475.56 \$310.33
90947 90951 90952 90953 90954 90955 90956 90957 90958 90959 90960	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visits Per Month), Patient 20 Years Of Age And Older	\$127.63 \$1,101.61 \$582.61 \$333.51 \$946.82 \$490.60 \$325.13 \$778.13 \$475.56 \$310.33 \$312.44 \$251.58
90947 90951 90952 90953 90954 90955 90956 90957 90958 90960 90961 90962	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older	\$127.63 \$1,101.61 \$582.61 \$333.51 \$946.82 \$490.60 \$325.13 \$708.15 \$310.33 \$312.44 \$251.58 \$181.27
90947 90951 90952 90953 90954 90955 90956 90957 90960 90961 90962 90963	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visit Per Month), Patient 12-19 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services Per Month, Patient Younger Than 2 Years Of Age	\$127.63 \$1,101.61 \$582.61 \$333.51 \$946.82 \$490.60 \$325.13 \$708.13 \$475.56 \$310.33 \$312.44 \$251.58 \$181.27
90947 90951 90952 90953 90954 90955 90956 90957 90960 90961 90962 90963	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services Per Month, Patient Younger Than 2 Years Of Age Home Dialysis Services Per Month, Patient 2-11 Years Of Age	\$127.63 \$1,101.61 \$582.61 \$333.51 \$946.82 \$490.60 \$325.13 \$708.13 \$475.56 \$310.33 \$312.44 \$251.58 \$181.27 \$569.59
90947 90951 90952 90953 90954 90955 90956 90957 90960 90961 90963 90964 90965	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services Per Month, Patient Younger Than 2 Years Of Age Home Dialysis Services Per Month, Patient 2-11 Years Of Age Home Dialysis Services Per Month, Patient 12-19 Years Of Age	\$127.63 \$1,101.61 \$582.61 \$333.51 \$946.82 \$490.60 \$325.13 \$708.13 \$475.56 \$310.33 \$312.44 \$251.58 \$181.27 \$569.59 \$488.76
90947 90951 90952 90953 90954 90956 90957 90958 90960 90961 90962 90963 90964 90965 90966	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older Home Dialysis Services Per Month, Patient Younger Than 2 Years Of Age Home Dialysis Services Per Month, Patient 12-11 Years Of Age Home Dialysis Services Per Month, Patient 20 Years Of Age Home Dialysis Services Per Month, Patient 20 Years Of Age Home Dialysis Services Per Month, Patient 20 Years Of Age	\$127.63 \$1,101.61 \$582.61 \$333.51 \$946.82 \$490.60 \$325.13 \$708.13 \$475.56 \$310.33 \$312.44 \$251.58 \$181.27 \$569.59 \$488.76
90947 90951 90952 90953 90954 90956 90957 90958 90960 90961 90962 90963 90966 90966 90966	Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older Home Dialysis Services Per Month, Patient 2-11 Years Of Age Home Dialysis Services Per Month, Patient 2-19 Years Of Age Home Dialysis Services Per Month, Patient 20 Years Of Age Home Dialysis Services Per Month, Patient 20 Years Of Age Home Dialysis Services Per Month, Patient 20 Years Of Age Home Dialysis Services, Per Day (Less Than Full Month Service), Patient Younger Than 2 Years Of Age	\$127.63 \$1,101.61 \$582.61 \$333.51 \$946.82 \$490.60 \$325.13 \$708.13 \$475.56 \$310.33 \$312.44 \$251.58 \$181.27 \$569.59 \$488.76 \$480.88 \$250.46
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	Description	Fee
	Description Imaging Of Colon Using Capsule Endoscope, With Interpretation And Report	\$832.50
	Measurement Of Colon Movement, Minimum 6 Hours Continuous Recording	\$126.86
91120	Rectal Sensation, Tone, And Compliance Test (le, Response To Graded Balloon Distention)	\$405.92
	Anorectal Manometry	\$195.65
	Electrogastrography, Diagnostic, Transcutaneous;	\$458.50
	Electrogastrography, Diagnostic, Transcutaneous; With Provocative Testing	\$479.44
	Measuring The Stiffness In The Liver Via Elastography	\$34.01
	Unlisted Diagnostic Gastroenterology Procedure New Patient Problem Focused Exam Of Visual System	Price By Report
	New Patient Problem Focused Exam Of Visual System New Patient Complete Exam Of Visual System	\$76.52 \$143.94
	Established Patient Problem Focused Exam Of Visual System	\$80.46
	Established Patient Complete Exam Of Visual System	\$117.24
	Assessment For Prescription Eye Wear Using A Range Of Lens Powers	\$13.29
	Complete Exam Of Visual System Under General Anesthesia	\$143.70
92019	Limited Exam Of Visual System Under General Anesthesia	\$69.16
	Exam Of The Internal Drainage System Of Eye	\$28.99
	Ct Scan Of Cornea	\$35.29
	Exam To Measure Eye Deviation And Range Of Motion	\$43.82
	Orthoptic And/Or Pleoptic Training, With Continuing Medical Direction And Evaluation	\$44.52
	Eye Training Exercise Under Supervision Of Health Care Professional Fitting Of Contact Lens For Treatment Of Ocular Surface Disease	\$23.29 \$32.62
	Fitting Of Contact Lens For Management Of Corneal Condition	\$88.83
	Exam Of Visual Field With Limited Testing	\$34.78
	Exam Of Visual Field With Intermediate Testing	\$48.94
	Exam Of Visual Field With Extended Testing	\$66.38
	Multiple Measurements Of Eye Fluid Pressure Over An Extended Time Period	\$81.32
92132	Scanning Computerized Ophthalmic Diagnostic Imaging, Anterior Segment, With Interpretation And Report, Unilateral Or Bilateral	\$32.96
92133	Scanning Computerized Ophthalmic Diagnostic Imaging, Posterior Segment, With Interpretation And Report, Unilateral Or Bilateral; Optic Nerve	\$38.77
00404	Consider Constant of Orbitales in Discussive Instant of Constant With Interreptation And Depart United and Orbitales Department	# 40.77
	Scanning Computerized Ophthalmic Diagnostic Imaging, Posterior Segment, With Interpretation And Report, Unilateral Or Bilateral; Retina Ophthalmic Biometry By Partial Coherence Interferometry With Intraocular Lens Power Calculation	\$42.77
	Corneal Hysteresis Determination	\$52.57 \$12.97
	Extended Examination Of Eye With Drawing Of Retina	\$25.96
	Extended Examination Of Eye With Drawing Of Optic Nerve And Surrounding Area (Macula)	\$16.51
	Imaging Of Retina For Disease Detection, With Review And Report By Remote Clinical Staff	\$15.16
92228	Imaging Of Retina For Disease Detection, With Review And Report By Remote Healthcare Professional	\$29.00
92229	Imaging Of Retina For Disease Detection, With Automated Review And Report At Point Of Care	\$44.76
	Exam Of Retinal Blood Vessels Using An Endoscope After Injection Of A Dye	\$93.32
	Exam Of Retinal Blood Vessels Using A Special Camera After Injection Of A Dye	\$140.99
92240	Exam Of Blood Vessels Between The White Part Of Eye And Retina Using A Special Camera After Injection Of A Dye	\$208.88
92242	Exam Of Retinal Blood Vessels And Blood Vessels Between The White Part Of Eye And Retina Using A Special Camera After Injection Of A	\$240.27
	Photography Of The Retina	\$39.13
	Measurement Of Eye Artery Pressure	\$18.76
	Measurement Of Eye Muscle Electrical Activity And Their Nerve Cells With Needle Electrode	\$82.31
	Measurement Of Eye Movement	\$104.00
92273	Full Field Recording Of Retinal Electrical Responses To External Stimuli With Interpretation And Report	\$134.82
	Multifocal Recording Of Retinal Electrical Responses To External Stimuli With Interpretation And Report	\$82.96
	Extended exam involving color vision testing	\$37.82
	Dark Adaptation Examination With Interpretation And Report	\$54.96
	Photography Of Content Of Eyes	\$24.23
	Imaging Of Front Third Of Eye Using A Special Microscope Imaging Of Front Third Of Eye Using A Special Camera After Injection Of A Dye	\$41.32 \$131.06
32201	imaging of Frenchilla of Eyo Obing A opecial outriola Alter Injection of A Dyc	00.IC و
92310	Contact Lens Services Both Eves	
	Contact Lens Services Both Eyes Contact Lens Services 1 Eye Where Natural Lens Is Absent	\$30.95
92311	Contact Lens Services Both Eyes Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent	
92311 92312	Contact Lens Services 1 Eye Where Natural Lens Is Absent	\$30.95 \$101.93
92311 92312 92313	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent	\$30.95 \$101.93 \$91.46
92311 92312 92313 92315 92316	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician	\$30.95 \$101.93 \$91.46 \$90.39 \$79.58 \$98.23
92311 92312 92313 92315 92316 92317	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician	\$30.95 \$101.93 \$91.46 \$90.39 \$79.58 \$98.23 \$83.51
92311 92312 92313 92315 92316 92317 92326	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens	\$30.95 \$101.93 \$91.46 \$90.39 \$79.53 \$98.23 \$83.51 \$41.92
92311 92312 92313 92315 92316 92317 92326 92370	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Repair And Refitting Of Spectacles	\$30.95 \$101.93 \$91.46 \$90.39 \$79.58 \$98.23 \$83.51 \$41.92
92311 92312 92313 92315 92316 92317 92326 92370 92499	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services 9 Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure	\$30.95 \$101.93 \$91.46 \$90.39 \$79.58 \$98.23 \$83.51 \$41.92 \$31.14 Price By Report
92311 92312 92313 92315 92316 92317 92326 92370 92499 92502	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia	\$30.95 \$101.93 \$91.46 \$90.39 \$79.58 \$98.23 \$83.51 \$41.92 \$31.14 Price By Report
92311 92312 92313 92315 92316 92317 92326 92370 92499 92502 92504	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure)	\$30.95 \$101.93 \$91.46 \$90.39 \$79.58 \$98.23 \$83.51 \$41.92 \$31.14 Price By Report
92311 92312 92313 92315 92316 92317 92326 92370 92499 92502 92504 92507	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure) Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder	\$30.95 \$101.93 \$91.46 \$90.39 \$79.58 \$98.23 \$83.51 \$41.92 \$31.14 Price By Report \$102.73 \$30.49
92311 92312 92313 92315 92316 92317 92326 92370 92499 92502 92504 92507 92508	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure)	\$30.95 \$101.93 \$91.46 \$90.39 \$79.58 \$98.23 \$83.51 \$41.92 \$31.14 Price By Report
92311 92312 92313 92315 92316 92317 92326 92370 92499 92502 92504 92507 92508 92511	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure) Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Group Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder	\$30.95 \$101.93 \$91.46 \$90.39 \$79.58 \$98.23 \$33.51 \$41.92 \$31.14 Price By Report \$102.73 \$30.49 \$22.62 \$17.42
92311 92312 92313 92315 92316 92317 92326 92370 9249 92502 92504 92507 92508 92511	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure) Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Group Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Nasopharyngoscopy With Endoscope (Separate Procedure)	\$30.95 \$101.93 \$91.46 \$90.39 \$77.58 \$98.23 \$83.51 \$41.92 \$31.14 Price By Report \$102.73 \$30.49 \$22.62 \$17.42
92311 92312 92313 92315 92316 92316 92370 92499 92502 92504 92507 92508 92511 92512 92516 92520	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services 5 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure) Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Group Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Nasopharyngoscopy With Endoscope (Separate Procedure) Nasal Function Studies, Eg, Rhinomanometry Facial Nerve Function Studies (Eg, Electroneuronography) Laryngeal Function Studies (Ie, Aerodynamic Testing And Acoustic Testing)	\$30.95 \$101.93 \$91.46 \$90.39 \$79.58 \$98.23 \$83.51 \$41.92 \$31.14 Price By Report \$102.73 \$30.49 \$22.62 \$17.42 \$127.32 \$43.50
92311 92312 92313 92315 92316 92316 92326 92326 92502 92504 92507 92508 92511 92512 92516 92520	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure) Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Group Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Nasopharyngoscopy With Endoscope (Separate Procedure) Nasal Function Studies, Eg, Rhinomanometry Facial Nerve Function Studies (Eg, Electroneuronography) Laryngeal Function Studies (Ie, Aerodynamic Testing And Acoustic Testing) Evaluation Of Speech Fluency	\$30.95 \$101.93 \$91.46 \$90.39 \$79.58 \$98.23 \$83.51 \$41.92 \$31.14 Price By Report \$102.73 \$30.49 \$22.62 \$17.42 \$127.32 \$43.50 \$66.19
92311 92312 92313 92315 92316 92316 92317 92326 92320 92502 92504 92507 92508 92511 92512 92516 92520 92521	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure) Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Group Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Nasopharyngoscopy With Endoscope (Separate Procedure) Nasal Function Studies, Eg, Rhinomanometry Facial Nerve Function Studies (Eg, Electroneuronography) Laryngeal Function Studies (Ie, Aerodynamic Testing And Acoustic Testing) Evaluation Of Speech Sound Production	\$30.95 \$101.93 \$91.46 \$90.39 \$79.38 \$88.23 \$83.51 \$41.92 \$31.14 Price By Report \$102.73 \$30.49 \$22.62 \$17.42 \$127.32 \$43.50 \$66.19 \$78.61
92311 92312 92313 92315 92316 92317 92326 92370 92499 92502 92504 92507 92508 92511 92512 92516 92520 92522 92522	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure) Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Group Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Nasopharyngoscopy With Endoscope (Separate Procedure) Nasal Function Studies, Eg, Rhinomanometry Facial Nerve Function Studies (Eg, Electroneuronography) Laryngeal Function Studies (Ie, Aerodynamic Testing And Acoustic Testing) Evaluation Of Speech Sound Production Evaluation Of Speech Sound Production With Evaluation Of Language Comprehension And Expression	\$30.95 \$101.93 \$91.46 \$90.39 \$77.85 \$88.23 \$83.51 \$41.92 \$31.14 Price By Report \$102.73 \$30.49 \$22.62 \$17.42 \$127.32 \$43.50 \$66.19 \$78.61 \$96.23 \$82.80
92311 92312 92313 92315 92316 92317 92326 92370 92499 92502 92504 92507 92511 92512 92520 92521 92523 92523	Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure) Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Group Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Nasopharyngoscopy With Endoscope (Separate Procedure) Nasal Function Studies, Eg, Rhinomanometry Facial Nerve Function Studies (Eg, Electroneuronography) Laryngeal Function Studies (Ie, Aerodynamic Testing And Acoustic Testing) Evaluation Of Speech Sound Production	\$30.9 \$101.9 \$91.4 \$99.3 \$79.5 \$98.2 \$83.5 \$41.9 \$71.6 \$71.6 \$102.7 \$30.4 \$127.3 \$43.5 \$43.5 \$78.6 \$96.2 \$82.8

Code	Description	Fee
	Spontaneous Nystagmus, Including Gaze	\$0.01
	Positional Nystagmus Test	\$0.01
92533	Caloric Vestibular Test, Each Irrigation (Binaural, Bithermal Stimulation Constitutes Four Tests)	\$21.06
92534	Optokinetic Nystagmus Test	\$0.01
92537	Assessment And Recording Of Balance System During Hot And Cold Irrigation Of Both Ears	\$44.08
92538	Assessment And Recording Of Balance System During Irrigation Of Both Ears	\$21.48
92540	Observation, Testing, And Recording Of Abnormal Eye Movement	\$106.61
92541	Spontaneous Nystagmus Test, Including Gaze And Fixation Nystagmus, With Recording	\$26.78
92542	Positional Nystagmus Test, Minimum Of 4 Positions, With Recording	\$30.78
92544	Optokinetic Nystagmus Test, Bidirectional, Foveal Or Peripheral Stimulation, With Recording	\$16.91
92545	Oscillating Tracking Test, With Recording	\$17.69
92546	Sinusoidal Vertical Axis Rotational Testing	\$120.36
92547	Use Of Vertical Electrodes (List Separately In Addition To Code For Primary Procedure)	\$10.14
92548	Computerized Dynamic Assessment Of Balance And Postural Instability	\$46.45
92550	Tympanometry And Reflex Threshold Measurements	\$23.17
92551	Screening Test, Pure Tone, Air Only	\$14.89
92552	Pure Tone Audiometry (Threshold) Air Only	\$23.58
92553	Pure Tone Audiometry (Threshold) Air And Bone	\$30.43
92555	Speech Audiometry Threshold;	\$17.83
92556	Speech Audiometry Threshold; With Speech Recognition	\$28.14
92557	Comprehensive Audiometry Threshold Evaluation And Speech Recognition (92553 And 92556 Combined)	\$39.39
	Evoked Otoacoustic Emissions, Screening (Qualitative Measurement Of Distortion Product Or Transient Evoked Otoacoustic Emissions),	
92558	Automated Analysis	\$12.55
	Loudness Balance Test, Alternate Binaural Or Monaural	\$44.27
	Tone Decay Test	\$22.39
	Stenger Test, Pure Tone	\$18.10
92567	Tympanometry (Impedance Testing)	\$17.57
	Acoustic Reflex Testing; Threshold	\$16.24
	Acoustic Immittance Testing, Includes Tympanometry (Impedance Testing), Acoustic Reflex Threshold Testing, And Acoustic Reflex Decay	·
92570	Testing	\$35.30
	Filtered Speech Test	\$27.26
92572	Assessment Of Hearing Using (Ssw) Word Test	\$42.81
	Sensorineural Acuity Level Test	\$67.63
	Synthetic Sentence Identification Test	\$36.41
	Stenger Test, Speech	\$19.75
	Visual Reinforcement Audiometry (Vra)	\$34.74
	Conditioning Play Audiometry	\$54.37
	Select Picture Audiometry	\$35.57
	Electrocochleography	\$110.12
02001	Distortion Product Evoked Otoacoustic Emissions; Limited Evaluation (To Confirm The Presence Or Absence Of Hearing Disorder, 3-6	Ψ110.12
92587	Frequencies) Or Transient Evoked Otoacoustic Emissions, With Interpretation And Report	\$23.14
0200.	Distortion Product Evoked Otoacoustic Emissions; Comprehensive Diagnostic Evaluation (Quantitative Analysis Of Outer Hair Cell Function By	Ψ20
92588	Cochlear Mapping, Minimum Of 12 Frequencies), With Interpretation And Report	\$35.86
	Hearing Aid Examination And Selection; Monaural	
	Hearing Aid Examination And Selection: Binaural	\$304.20
92591	Hearing Aid Examination And Selection; Binaural Hearing Aid Check: Monaural	\$304.20 \$286.90
92591 92592	Hearing Aid Check; Monaural	\$304.20 \$286.90 \$20.19
92591 92592 92593	Hearing Aid Check; Monaural Hearing Aid Check; Binaural	\$304.20 \$286.90 \$20.19 \$25.52
92591 92592 92593 92594	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18
92591 92592 92593 92594 92595	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62
92591 92592 92593 92594 92595	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18
92591 92592 92593 92594 92595 92596	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60
92591 92592 92593 92594 92595 92596	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60
92591 92592 92593 92594 92595 92596 92597 92601	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$168.61
92591 92592 92593 92594 92595 92596 92597 92601 92602	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$168.61
92591 92592 92593 92594 92595 92596 92597 92601 92602 92603	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$168.61 \$103.58
92591 92592 92593 92594 92595 92596 92597 92601 92602 92603	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$168.61
92591 92592 92593 92594 92595 92596 92596 92601 92602 92603 92604	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient;	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$168.61 \$103.58 \$155.62 \$668.32
92591 92592 92593 92594 92595 92596 92596 92601 92602 92603 92604	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$168.61 \$103.58 \$155.62 \$68.32
92591 92592 92593 92594 92595 92596 92596 92601 92602 92603 92604	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$168.61 \$103.58 \$155.62 \$668.32
92591 92592 92593 92594 92595 92596 92597 92602 92603 92604 92605 92606	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient;	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$103.58 \$155.62 \$68.32
92591 92592 92593 92594 92595 92596 92597 92602 92603 92604 92605 92606	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$168.61 \$103.58 \$155.62 \$68.32
92591 92592 92593 92594 92595 92596 92597 92601 92602 92603 92604 92605 92607	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient;	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$103.58 \$155.62 \$68.32 \$0.01 \$0.01
92591 92592 92593 92594 92595 92596 92597 92601 92602 92603 92604 92605 92606	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Each Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure)	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$103.58 \$155.62 \$68.32 \$0.01 \$0.01
92591 92592 92593 92594 92595 92596 92597 92601 92602 92603 92604 92605 92607 92608	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$168.61 \$103.58 \$155.62 \$68.32 \$0.01 \$0.01 \$117.99 \$46.57 \$91.83
92591 92592 92593 92594 92595 92596 92597 92602 92603 92604 92605 92607 92608 92608 92609 92610	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Each Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure) Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification Evaluation Of Oral And Pharyngeal Swallowing Function	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$168.61 \$103.58 \$155.62 \$68.32 \$0.01 \$0.01 \$117.99 \$46.57 \$91.83
92591 92592 92593 92594 92595 92596 92597 92601 92603 92604 92605 92606 92607 92608 92609 92610 92611	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Each Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure) Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification Evaluation Of Oral And Pharyngeal Swallowing Function Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$103.58 \$155.62 \$68.32 \$0.01 \$0.01 \$117.99 \$46.57 \$91.83 \$89.91
92591 92592 92593 92594 92595 92596 92601 92602 92603 92604 92605 92606 92607 92608 92609 92610 92611	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation Of Oral And Pharyngeal Swallowing Function By Cine Or Video Recording Evaluation And Recording Of Swallowing Using An Endoscope	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$103.58 \$155.62 \$68.32 \$0.01 \$0.01 \$117.99 \$46.57 \$91.83 \$89.91 \$86.71
92591 92592 92593 92594 92595 92596 92602 92603 92604 92606 92606 92607 92608 92609 92611 92611 92612	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating D	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$103.58 \$155.62 \$68.32 \$0.01 \$0.01 \$117.99 \$46.57 \$91.83 \$89.91 \$86.71 \$171.24
92591 92592 92593 92594 92595 92596 92596 92602 92603 92604 92605 92606 92607 92608 92610 92611 92611 92613 92613	Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Each Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure) Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification Evaluation Of Oral And Pharyngeal Swallowing Function By Cine Or Video Recording Evaluation And Recording Of Swallowing Using An Endoscope Evaluation And Recording Of Voice Box Sensory Function Using An Endoscope	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$103.58 \$155.62 \$68.32 \$0.01 \$0.01 \$117.99 \$46.57 \$91.83 \$89.91 \$86.71 \$171.24 \$37.93
92591 92592 92593 92594 92595 92596 92597 92601 92602 92603 92604 92605 92607 92608 92609 92610 92611 92612 92613 92614	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient, First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Fach Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure) Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification Evaluation Of Oral And Pharyngeal Swallowing Function By Cine Or Video Recording Evaluation And Recording Of Swallowing Function By Cine Or Video Recording Evaluation And Recording Of Swallowing Using An Endoscope Evaluation, Recording, And Interpretation Of Voice Box Sensory Function Using An Endoscope	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$168.61 \$103.58 \$155.62 \$68.32 \$0.01 \$0.01 \$117.99 \$46.57 \$91.83 \$89.91 \$86.71 \$171.24 \$37.93 \$139.57
92591 92592 92593 92594 92595 92596 92597 92601 92602 92603 92604 92605 92607 92608 92609 92610 92611 92612 92613 92614 92615 92616	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient, First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Each Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure) Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification Evaluation For Face Vital And Pharyngeal Swallowing Function Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording Evaluation And Recording Of Swallowing Using An Endoscope Evaluation, Recording, And Interpretation Of Voice Box Sensory Function Using An Endoscope Evaluation And Recording Of Swallowing And Voice Box Sensory Function Using An Endoscope	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$168.61 \$103.58 \$155.62 \$68.32 \$0.01 \$0.01 \$117.99 \$46.57 \$91.83 \$89.91 \$17.24 \$37.93 \$139.57 \$30.54
92591 92592 92593 92594 92595 92596 92597 92601 92602 92603 92604 92605 92607 92608 92609 92610 92611 92612 92613 92614 92615 92616	Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation And Recording Of Swallowing Using An Endoscope Evaluation And Recording Of Swallowing Using An Endoscope Evaluation And Recording Of Swallowing And Voice Box Sensory Function Using An Endoscope Evaluation And Recording Of Swallowing And Voice Box Sensory Function Using An Endoscope Evaluation And Recording Of Swallowing And Voice Box Sensory Function Using An En	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$168.61 \$103.58 \$155.62 \$68.32 \$0.01 \$0.01 \$117.99 \$46.57 \$91.83 \$89.91 \$86.71 \$171.24 \$37.93 \$139.57
92591 92592 92593 92594 92595 92596 92597 92601 92603 92604 92605 92606 92607 92610 92611 92612 92613 92614 92615 92617	Hearing Aid Check; Binaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Ider Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Each Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure) Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification Evaluation Of Oral And Paryngeal Swallowing Function By Cine Or Video Recording Evaluation And Recording Of Swallowing Using An Endoscope Evaluation, Recording, And Interpretation Of Swallowing Using An Endoscope Evaluation And Recording Of Voice Box Sensory Function Using An Endoscope Evaluation, Recording, And Interpretation Of Swallowing And Voice Box Sensory Function Using An Endoscope Evaluation For Prescri	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$168.61 \$103.58 \$155.62 \$68.32 \$0.01 \$0.01 \$117.99 \$46.57 \$91.83 \$89.91 \$86.71 \$171.24 \$37.93 \$139.57 \$30.54 \$206.63 \$38.18
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92591 92592 92593 92594 92595 92596 92597 92601 92602 92603 92604 92605 92607 92608 92609 92610 92611 92612 92613 92614 92615 92616 92617	Hearing Aid Check; Binaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Fach Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure) Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification Evaluation Of Oral And Pharyngeal Swallowing Function Motion Fluoroscopic Evaluation Of Swallowing Using An Endoscope Evaluation And Recording Of Swallowing Using An Endoscope Evaluation, Recording, And Interpretation Of Swallowing Jing An Endoscope Evaluation And Recording, And Interpretation Of Swallowing And Voice Box Sensory Function Using An Endoscope Evaluation And Recording, And Interpretation Of Swallowing And Voice Box Sensory	\$304.20 \$286.90 \$20.19 \$25.52 \$47.18 \$28.62 \$66.60 \$68.17 \$168.61 \$103.58 \$155.62 \$68.32 \$0.01 \$0.01 \$117.99 \$46.57 \$91.83 \$89.91 \$86.71 \$171.24 \$37.93 \$139.57 \$30.54 \$20.63

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	Description Analysis, Programming, And Verification Of Sound Processor For Bone-Anchored Inner Ear Implant, First Hour	Fee \$69.30
	Analysis, Programming, And Verification Of Sound Processor For Bone-Anchored Inner Ear Implant, First Hour	\$17.79
	Assessment Of Tinnitus (Includes Pitch, Loudness Matching, And Masking)	\$67.69
	Evaluation Of Hearing Function To Determine Candidacy For, Or Postoperative Status Of, Surgically Implanted Hearing Device; First Hour	\$90.91
	Evaluation Of Hearing Function To Determine Candidacy For, Or Postoperative Status Of, Surgically Implanted Hearing Device; Additional 15	*
92627	Minutes	\$19.73
	Auditory Rehabilitation; Pre-Lingual Hearing Loss	Price By Report
	Auditory Rehabilitation; Post-Lingual Hearing Loss	Price By Report
	Analysis With Programming Of Auditory Brainstem Implant, Per Hour	\$105.78
	Screening Evaluation Of Brain Response To Sound With Automated Analysis	\$29.80
	Evaluation Of Brain Response To Sound For Determination Of Hearing Status With Interpretation And Report	\$91.57
	Evaluation Of Brain Response To Sound For Determination Of Hearing Threshold With Interpretation And Report Evaluation Of Brain Response To Sound For Diagnosis Of Nervous System Disorders With Interpretation And Report	\$119.88 \$87.73
	Ear, Nose, Or Throat Procedure	\$87.73 \$16.24
32700	Ear, Nose, of filloat Focusio	ψ10.24
92920	Balloon Dilation Of Narrowed Or Blocked Major Coronary Artery Or Branch (Accessed Through The Skin), Each Additional Artery Or Branch	\$510.92
	Balloon Dilation Of Narrowed Or Blocked Major Coronary Artery Or Branch (Accessed Through The Skin), Single Artery Or Branch	\$0.01
92924	Removal Of Plaque Of Major Coronary Artery Or Branch, Accessed Through The Skin, Single Artery Or Branch	\$608.76
92928	Catheter Placement Of Stents In Major Coronary Artery Or Branch, Accessed Through The Skin, Each Additional Artery Or Branch	\$568.33
	Catheter Placement Of Stents In Major Coronary Artery Or Branch, Accessed Through The Skin, Single Artery Or Branch	\$0.01
	Removal Of Plaque And Insertion Of Stent In Major Coronary Artery Or Branch, Accessed Through The Skin, Single Artery Or Branch	\$637.06
	Insertion Of Stent, Removal Of Plaque And/Or Balloon Dilation Of Coronary Vessel, Accessed Through The Skin, Single Vessel, Including Distal	*
92937	Protection When Performed	\$567.61
92938	Insertion Of Stent, Removal Of Plaque And/Or Balloon Dilation Of Coronary Vessel, Accessed Through The Skin, Each Additional Branch	\$0.01
	Insertion Of Stent, Removal Of Plaque And/Or Balloon Dilation Of Coronary Vessel During Heart Attack, Accessed Through The Skin	\$638.51
92943	Insertion Of Stent, Removal Of Plaque And/Or Balloon Dilation Of Coronary Vessel, Accessed Through The Skin, Single Vessel	\$638.26
	Insertion Of Stent, Removal Of Plaque And/Or Balloon Dilation Of Coronary Vessel, Accessed Through The Skin, Each Additional Artery,	
	Branch Or Graft	\$0.01
	Cardiopulmonary Resuscitation (Eg, In Cardiac Arrest)	\$357.86
	Temporary Transcutaneous Pacing	\$0.85
	Cardioversion, Electrical Conversion Of Arrhythmia, External	\$163.82
	Cardioversion, Electrive, Electrical Conversion Of Arrhythmia; Internal (Separate Procedure)	\$215.29
	Cardioassist-Method Of Circulatory Assist; Internal	\$164.10
	Cardioassist-Method Of Circulatory Assist; External Shockwave Destruction Of Calcified Plaque In Coronary Artery Accessed Through Skin Using Catheter	\$87.07 \$121.58
	Removal Of Blood Clot In Heart Artery, Accessed Through The Skin	\$170.43
32313	Transcatheter Placement Of Radiation Delivery Device For Subsequent Coronary Intravascular Brachytherapy (List Separately In Addition To	ψ170.43
92974	Code For Primary Procedure)	\$140.16
92975	Thrombolysis, Coronary; By Intracoronary Infusion, Including Selective Coronary Angiography	\$326.01
92977	Thrombolysis, Coronary; By Intravenous Infusion	\$52.98
92978	Ultrasound Evaluation Of Heart Blood Vessel Or Graft, Initial Vessel	\$96.90
	Ultrasound Evaluation Of Heart Blood Vessel Or Graft, Each Additional Vessel	\$73.72
	Catheter Based Repair Of Left Lower Heart (Aortic) Valve, Accessed Through The Skin	\$1,159.45
	Catheter Based Repair Of Heart Valve (Mitral) Between Left Upper And Lower Chambers, Accessed Through The Skin	\$1,198.79
	Catheter Based Repair Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin	\$1,000.38
	Balloon Catheter Opening Of Major Lung Artery (Pulmonary), Accessed Through The Skin, Single Vessel	\$620.14
	Balloon Catheter Opening Of Major Lung Artery (Pulmonary), Accessed Through The Skin, Each Additional Vessel	\$307.32
	Electrocardiogram, Routine Ecg With At Least 12 Leads; With Interpretation And Report	\$14.78
	Electrocardiogram, Routine Ecg With At Least 12 Leads; Tracing Only, Without Interpretation And Report Electrocardiogram, Routine Ecg With At Least 12 Leads; Interpretation And Report Only	\$6.30 \$8.48
93015	Exercise Or Drug-Induced Heart And Blood Vessel Stress Test With Ekg Monitoring, Physician Supervision, Interpretation, And Report	\$74.76
93016	Cardiovascular Stress Test Using Maximal Or Submaximal Treadmill Or Bicycle Exercise, Continuous Electrocardiographic Monitoring, And/Or Pharmacological Stress; Supervision Only, Without Interpretation And Report	\$22.42
93017	Cardiovascular Stress Test Using Maximal Or Submaximal Treadmill Or Bicycle Exercise; Tracing Only, Without Interpretation And Report	\$37.32
	Exercise Or Drug-Induced Heart And Blood Vessel Stress Test With Ekg Monitoring, Physician Interpretation And Report	\$15.03
	Ergonovine Provocation Test	\$103.59
	Microvolt T-Wave Alternans For Assessment Of Ventricular Arrhythmias	\$115.56
	Rhythm Ecg, One To Three Leads; With Interpretation And Report	\$12.97
	Rhythm Ecg, One To Three Leads; Tracing Only Without Interpretation And Report	\$5.34
	Rhythm Ecg, One To Three Leads; Interpretation And Report Only	\$7.04
	Analysis Of Pressure Of Upper Limb Artery With Interpretation And Report	\$14.94
	Activation Of Implanted Phrenic Nerve Stimulator	\$87.02
	Evaluation And Programming Of Implanted Phrenic Nerve Stimulator System Evaluation And Programming Of Implanted Phrenic Nerve Stimulator System During Sleep Study	\$75.83
	Evaluation And Programming Of Implanted Phrenic Nerve Stimulator System During Sleep Study Evaluation Of Implanted Phrenic Nerve Stimulator System	\$136.73 \$44.95
	Heart Rhythm Tracing, Analysis, And Interpretation Of 48-Hour EKG, Includes Recording, Scanning Analysis With Report	\$80.31
93224	External Electrocardiographic Recording Up To 48 Hours By Continuous Rhythm Recording And Storage; Recording (Includes Connection,	\$80.31
93225	Recording, And Disconnection)	\$20.48
	Heart Rhythm Analysis, Interpretation And Report Of 48-Hour EKG	\$40.46
	Heart Rhythm Tracing, Analysis, And Interpretation Of 48-Hour EKG, Includes Recording, Scanning Analysis With Report	\$19.38
	Heart Rhythm Tracing, Computer Analysis, And Interpretation Of Patient-Triggered Events Greater Than 24-Hour EKG Up To 30 Days	\$26.30
	Heart Rhythm Tracing, Computer Analysis, Physician Prescribed Transmission Of Patient-Triggered Events Greater Than 24-Hour EKG Up To	
93229	30 Days	\$922.38

Code	Description	Fee
93241	Heart Rhythm Recording, Analysis, Report, Review, And Interpretation Of Continous External Ekg Over More Than 48 Hours Up To 7 Days	\$239.86
	Heart Rhythm Recording Continous External EKG Over More Than 48 Hours Up To 7 Days	\$14.40
	Heart Rhythm Analysis And Report Of Continous External EKG Over More Than 48 Hours Up To 7 Days Heart Rhythm Review, And Interpretation Of Continous External EKG Over More Than 48 Hours Up To 7 Days	\$208.41
		\$22.16
	Heart Rhythm Recording, Analysis, Interpretation And Report Of Continous External EKG Over More Than 1 Week Up To 1 Weeks Heart Rhythm Recording Of Continous External EKG Over 8-15 Days	\$252.67
	Heart Rhythm Analysis And Report Of Continous External EKG Over 8-15 Days	\$14.40 \$219.09
	Heart Rhythm Review And Interpretation Of Continous External EKG Over 8-15 Days	\$24.35
		•
	Programming Device Evaluation Of Heart Monitoring System With Adjustment Of Programmed Values With Analysis, Review And Report	\$72.83
	Evaluation Of Defibrillator With Analysis, Review, And Report	\$66.44
93264	Remote Monitoring Of Wireless Pressure Sensor In Lung Artery With Qualified Health Care Professional Analysis, Review, And Report	\$39.03
93268	External Patient And, When Performed, Auto Activated Electrocardiographic Rhythm Derived Event Recording With Symptom-Related Memory Loop With Remote Download Capability Up To 30 Days, 24-Hour Attended Monitoring; Includes Transmission, Review And Int	\$197.81
93270	External Patient And, When Performed, Auto Activated Electrocardiographic Rhythm Derived Event Recording With Symptom-Related Memory Loop With Remote Download Capability Up To 30 Days, 24-Hour Attended Monitoring; Recording (Includes Connection, Record	\$8.85
93271	External Patient And, When Performed, Auto Activated Electrocardiographic Rhythm Derived Event Recording With Symptom-Related Memory Loop With Remote Download Capability Up To 30 Days, 24-Hour Attended Monitoring; Transmission Download And Analysis	\$163.28
	External Patient And, When Performed, Auto Activated Electrocardiographic Rhythm Derived Event Recording With Symptom-Related Memory Loop With Remote Download Capability Up To 30 Days, 24-Hour Attended Monitoring; Review And Interpretation By A Physicia	\$25.68
93278	Signal-Averaged Electrocardiography (Saecg), With Or Without Ecg	\$27.36
93279	Evaluation, Testing, And Programming Adjustment Of Permanent Single Lead Pacemaker System In One Chamber Of Heart With Qualified Health Care Professional Analysis, Review, And Report	\$59.16
93280	Evaluation, Testing, And Programming Adjustment Of Permanent Dual Lead Pacemaker System With Physician Analysis, Review, And Report	\$70.09
93281	Evaluation, Testing, And Programming Adjustment Of Permanent Multiple Lead Pacemaker System With Physician Analysis, Review, And Report	\$81.59
93282	Evaluation, Testing And Programming Adjustment Of Defibrillator With Analysis, Review And Report, Single Lead Defibrillator System	\$74.99
93283	Evaluation, Testing And Programming Adjustment Of Defibrillator With Analysis, Review And Report, Dual Lead Defibrillator System	\$96.46
93284	Evaluation, Testing And Programming Adjustment Of Defibrillator With Analysis, Review And Report, Multiple Lead Defibrillator System	\$108.27
02205	Evaluation, Testing, And Programming Adjustment Of Heart Rhythm Monitor System Implanted Under Skin With Qualified Health Care	¢40.00
93285	Professional Analysis, Review, And Report Evaluation, Testing, And Programming Adjustment Of Single, Dual, Or Multiple Lead Pacemaker System Before Or After Surgery, Procedure,	\$49.98
93286	Or Test With Qualified Health Care Professional Analysis, Review, And Report	\$33.75
93287	Evaluation And Programming Adjustment Of Defibrillator With Analysis, Review And Report	\$39.25
	Evaluation Of Parameters Of Leadless, Single, Dual, Or Multiple Lead Pacemaker System With Qualified Health Care Professional Analysis,	* 4 4 00
	Review, And Report Evaluation Of Defibrillator Including Connection, Recording And Disconnection	\$44.63 \$76.81
93209	Evaluation Of Parameters Of Implantable Heart And Blood Vessel Monitor System With Qualified Health Care Professional Analysis, Review,	\$70.01
93290	And Report	\$39.10
93291	Evaluation Of Heart Rhythm Monitor System Implanted Under Skin With Qualified Health Care Professional Analysis, Review, And Report	\$43.04
	Evaluation Of Wearable Defibrillator System Including Connection, Disconnection, Recording, Physician Analysis, Review, And Report	\$49.73
93293	Telephonic Evaluation Of Single, Dual, Or Multiple Lead Pacemaker Heart Rhythm Strips Up To 90 Days	\$50.76
93294	Remote Evaluations Of Single, Dual, Or Multiple Lead Pacemaker System With Qualified Health Care Professional Analysis, Review, And Report, Up To 90 Days	\$31.03
	Remote Evaluations Of Defibrillator Up To 90 Days With Analysis, Review And Report	\$38.42
	Remote Evaluations Of Single, Dual, Or Multiple Lead Pacemaker System Or Implantable Defibrillator System With Technician Review, Support	*
93296	And Distribution Of Results, Up To 90 Days Remote Evaluations Of Implantable Heart And Blood Vessel Monitor System With Qualified Health Care Professional Analysis, Review, And	\$24.83
93297	Report, Up To 30 Days	\$27.03
	Remote Evaluations Of Heart Rhythm Monitor System Implanted Under Skin With Qualified Health Care Professional Analysis, Review, And Report, Up To 30 Days	\$27.03
	Transthoracic Echocardiography For Congenital Cardiac Anomalies; Complete Transthoracic Echocardiography For Congenital Cardiac Anomalies; Follow-Up Or Limited Study	\$242.37 \$136.02
	Ultrasound Examination Of Heart Including Color-Depicted Blood Flow Rate, Direction, And Valve Function	\$213.45
	Echocardiography, Transthoracic, Real-Time With Image Documentation (2D), Includes M-Mode Recording, When Performed, Complete, Without Spectral Or Color Doppler Echocardiography	\$149.37
	Echocardiography, Transthoracic, Real-Time With Image Documentation (2D), Includes M-Mode Recording, When Performed, Follow-Up Or Limited Study	\$106.11
	Echocardiography, Transesophageal, Real Time With Image Documentation (2D) (With Or Without M-Mode Recording); Including Probe Placement, Image Acquisition, Interpretation And Report	\$256.83
	Echocardiography, Real Time With Image Documentation (2D) (With Or Without M-Mode Recording), Transesophageal; Placement Of	
	Transesophageal Probe Only Echocardiography, Real Time With Image Documentation (2D) (With Or Without M-Mode Recording), Transesophageal; Image Acquisition,	\$11.52
	Interpretation And Report Only Transesophageal Echocardiography For Congenital Cardiac Anomalies; Including Probe Placement, Image Acquisition, Interpretation And	\$200.17
	Report Transcephogogal Echagordiagraphy For Congenital Cardiae Anomaliae: Placement Of Transcephogogal Broha Only	\$138.00
	Transesophageal Echocardiography For Congenital Cardiac Anomalies; Placement Of Transesophageal Probe Only Transesophageal Echocardiography For Congenital Cardiac Anomalies; Image Acquisition, Interpretation And Report Only	\$26.43 \$99.55
3331 <i>1</i>	manocoophagoar Echocardiography i or Congenitar Cardiac Anomalies, image Acquisition, interpretation And Nepott Only	фээ.55

Store Stor	Code	Description	Fee
5000 Diopore Ustrasound Study Of Heart Blood Flow, Valves, And Chambers 5000 Diopore Ustrasound Study Of Cook United Heart Blood Flow, Nature, And Study Function 5000 Diopore Ustrasound Study Of Cook United Heart Blood Flow, Reak, And Valves Function 5000 Diopore Ustrasound Study Of Cook United Heart Blood Flow, Reak, And Valves Function 5000 Disposed Ustrasound Study Of Cook United Heart Blood Flow, Reak, And Valves Function 5000 Disposed Ustrasound Study Of Cook United Heart Blood Flow, Reak, And Valves Function 5000 Disposed Valves Of Cook United Study St	93318		\$104.63
35031 Floribu-Up Or Limitach Heart Deppler Ultrasound Study Of Heart Blood Flow, Yalves, And Chambers 527.5 35035 Dippler Ultrasound Study Of Conditional Study of Heart Blood Flow, Rate, And Valves Function 527.5 35035 Ultrasound Examination Of The Heart Performed During Rest, Exercise, And/Or Drug-Incubed Stress With Interpretation And Report 520.5 35035 Ultrasound Examination And Continuous Mentioning Of The Heart Performed During Rest, Exercise, And/Or Drug-Incubed Stress With Interpretation And Report 520.5 35035 Ultrasound Examination Of The Heart Performed During Procedure On Heart Or Great Road Vessel Via Catheter 525.2 35035 Use Of Extended Exposition Control of Street Ultrasound Examination During Procedure On Heart Or Great Blood Vessel Via Catheter 523.2 35035 Displace Control of Device in Exposition of Control of Street Vision Under Vision Street Vision Street Vision Under Vision Street Vision Street Vision Under Vision Street Vision Street Vision Under Vision And Injection 53.10.1 30355 University of Control of			\$49.55
33325 Digophir Utrescound Study Of Color Directord Heart Blood Flow, Rate, And Valve Function 3202.5 3305 Utanasound Examination Of The Heart Performed During Rest, Exercise, And Or Drug-induced Stress With Interpretation And Report 3202.5 3305 Utanasound Examination And Cardinuous Monitoring Of The Heart Performed During Rest, Exercise, And Or Drug-induced Stress With 1889 Students And And Report 3202.5 3305 Use Of Echocardiographic Contrast Agent During Stress Echocardiography (List Separately in Addition To Code For Primary Procedure) 3305 Perist Miscolar Stress Interpretation And Report 3305 Perist Miscolar Stress Interpretation And Supervision During Procedure On Heart Or Griest Blood Vessel Van Carleter 3304 Stress Interpretation Contrast Agent During Stress Echocardiography (List Separately in Addition To Code For Primary Procedure) 3304 Perist Miscolar Stress Interpretation And Supervision And Stress Interpretation And Interpre	93320	Doppler Ultrasound Study Of Heart Blood Flow, Valves, And Chambers	\$55.13
Section Continued to Commission			\$27.37
Section Sect	93325	Doppler Ultrasound Study Of Color-Directed Heart Blood Flow, Rate, And Valve Function	\$25.80
S251 MacRon OF Decha Exceptaguage For Heart Ultimonumal Examination During Procedure On Heart Of Great Bilload Vessel Via Catheter S232.7	93350		\$202.55
33355 Heart Music Strain Imaging 33451 Instantion CF Cambeter For Diagnostic Evaluation Of Right Heart Structures 33457 Instantion CF Cambeter For Diagnostic Evaluation Of Right Heart Structures 33458 Instantion CF Cambeter For Diagnostic Evaluation Of Right Heart Structures 33458 Instantion CF Cambeter For Diagnosic Evaluation Of Right Heart Structures 33458 Instantion CF Cambeter For Imaging of Pitent Including Imaging Interpretation And Supervision And Injection 33960. 33455 Instantion CF Cambeter For Imaging Of Heart Including Imaging Imaging Interpretation And Supervision And Injection 33960. 33455 Instantion CF Cambeter For Imaging Of Heart Including Imaging Of Bood Vessels Of Certist 33457 Imagention Of Cambeter In Right Heart For X-Ray Imaging Of Bood Vessels Of Certist 33457 Imagention Of Cambeter In Right Heart For X-Ray Imaging Of Bood Vessels Of Certist 33457 Imagention Of Cambeter In Right Heart For Imaging Of Blood Vessels Of Certist 33457 Imagention Of Cambeter In Latt Heart For Imaging Of Blood Vessels And aft. Lower Heart Including Imaging Interpretation And Supervision And 34588 Supervision And Indication 34589 Supervision And Indication 3459 Supervision And Indication 3459 Supervision And Indication 3459 Supervision And Indication 3459 Supervision And Indication 3450 Supervision And Indication Indicating Imaging Office Supervision Indicating Imaging Office Supervision Indicating Imaging Office Supervision Indicating Imaging Office Supervision Indicating Imaging Supervision Indicating Imaging Supervision Interpretation, And Report, For Selective Coronary 3450 Subdivide Subsessing Phenomenor Indicating Imaging Supervi	93351		\$251.02
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sartion Of Catheter in Right And Left Heart And Left Lower Heart For Imaging Of Blood Vessels And/Or Grafts Including Imaging 33488] Insertion Of Catheter Into Left Heart Through The Septum Or Apical Area Of The Heart \$203.59 Pharmacologic Agent Administration (Egi, Intellaed Nitric Oxide, Intravenous Influsion Of Nitropusside, Debutamine, Milmone, Or Other Agent) \$3488] Including Assessing Hemodynamic Measurements Before, During, After And Repeat Pharmacologic Agent Administ \$100.66 Physiologic Excrices Study (Egi, Bicycle Or Arm Ergometry) Including Assessing Hemodynamic Measurements Before And After (List \$110.56 Separately In Addition To Code For Pirmary Procedure) \$134.66 Separately In Addition To Code For Pirmary Procedure) \$136.05 Separately In Addition To Code For Pirmary Procedure) \$136.05 Separately Pin Addition To Code For Pirmary Procedure) \$136.05 Separately During Cardiac Catheterization (List Separately In Addition To Code For Pirmary Procedure) \$136.05 Separately During Congenital Heart Catheterization (List Separately In Addition To Code For Pirmary Procedure) \$136.05 Separately During Congenital Heart Catheterization (List Separately In Addition To Code For Pirmary Procedure) \$136.05 Separately In Congenital Heart Catheterization Including Imaging Supervision, Interpretation, And Report; For Selective Opportunity of Separately In Addition To Code For Pirmary Procedure) \$136.05 Separately In Code International Pirocedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Selective Left Ventricular Or Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Selective Right Ventricular Or Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Selective Right Ventricular Or Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Supravalvular Anotography (List Separately I			
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Injection For Selective Imaging Of Pulmonary Artery During Heart Catheterization, On One Side Of Body \$32.68		Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Pulmonary Angiography (List	
Strict S			
St.22 Ultrasound Evaluation Of Heart Blood Vessel During Diagnosis Or Treatment, Each Additional Vessel \$51.2			
Injection For Selective Imaging Of Pulmonary Artery During Heart Catheterization, On Both Sides Of Body \$54.49			
Injection For Selective Imaging Of Pulmonary Vein During Heart Catheterization \$60.2			
Injection For Selective Imaging Of Major Aortopulmonary Collateral Arteries During Heart Catheterization \$80.55		, , , , , , , , , , , , , , , , , , , ,	
System S		, · · · · · · · · · · · · · · · · · · ·	
Sast Catheter Based Closure Of Congenital Heart Defect With Implant, Accessed Through The Skin \$1,149.00		, , , , ,	\$942.85
35883 Therapy For Reduction Of Lower Heart Chamber Defect Via Catheter Accessed Through The Skin \$642.85	93581	Catheter Based Closure Of Congenital Heart Defect With Implant, Accessed Through The Skin	\$1,149.00
S49.19 Sassa Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Superior Vena Cava S49.19 Sassa Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of The Azygos/Hemiazygos Venous System S46.29 Sassa Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Coronary Sinus S58.59 Sassa Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Above The Heart S86.39 Sassa Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart S86.39 Sassa Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart S87.19 Sassa Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart S87.19 Sassa Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart S87.19 Sassa Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart S87.19 Sassa Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart S87.19 Sassa Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart S87.19 Sassa Review By Radiologist Of Vein Imaging For Congenital Heart Defect In Heart With Normal Native Blood Vessel S87.19 Sassa	93582	Closure Of Congenital Heart Defect From Pulmonary (Lung) Artery To Aorta Via Catheter Accessed Through The Skin	\$541.17
Sassass Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of The Azygos/Hemiazygos Venous System Sassasses Sassass	93583		\$642.83
Sassa Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Coronary Sinus Sassa Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Above The Heart Sassa Sassa Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart Sassa Sassa Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart Sassa Sass			\$49.16
93588Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart\$87.1993590Transcatheter Closure Of Leak Adjacent To Mitral Valve Using First Closure Device\$987.8993591Transcatheter Closure Of Leak Adjacent To Aortic Valve Using First Closure Device\$816.2993592Transcatheter Closure Of Leak Adjacent To Heart Valve Using Additional Closure Device\$359.51Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood VesselPrice By Report93593Connections, Using Imaging GuidancePrice By Report93594Connections, Using Imaging GuidancePrice By Report93595Insertion Of Catheter Into Left Side Of Heart For Evaluation Of Congenital Heart Defect, Using Maging GuidancePrice By Report93596Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood VesselPrice By Report93596Connections, Using Imaging GuidancePrice By ReportInsertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood VesselPrice By Report93597Connections, Using Imaging GuidancePrice By Report			\$46.22 \$58.52
93590 Transcatheter Closure Of Leak Adjacent To Mitral Valve Using First Closure Device \$987.8 93591 Transcatheter Closure Of Leak Adjacent To Aortic Valve Using First Closure Device \$816.2 93592 Transcatheter Closure Of Leak Adjacent To Heart Valve Using Additional Closure Device \$359.5 Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel Price By Report Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel Price By Report Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect, Using Maging Guidance Price By Report Insertion Of Catheter Into Left Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel Price By Report Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel Price By Report Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel Price By Report Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel Price By Report Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel Price By Report Connections, Using Imaging Guidance Price By Report Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel Price By Report Connections, Using Imaging Guidance Price By Report Connections, Using Imaging Guidance	93587	Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Above The Heart	\$86.31
93591 Transcatheter Closure Of Leak Adjacent To Aortic Valve Using First Closure Device \$816.2: 93592 Transcatheter Closure Of Leak Adjacent To Heart Valve Using Additional Closure Device \$359.5i Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel 93593 Connections, Using Imaging Guidance Price By Repoi 93594 Connections, Using Imaging Guidance Price By Repoi 93595 Insertion Of Catheter Into Left Side Of Heart For Evaluation Of Congenital Heart Defect, Using Maging Guidance Price By Repoi Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel 93596 Connections, Using Imaging Guidance Price By Repoi Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel 93596 Connections, Using Imaging Guidance Price By Repoi Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel 93597 Connections, Using Imaging Guidance Price By Repoi			\$87.19 \$987.85
93592 Transcatheter Closure Of Leak Adjacent To Heart Valve Using Additional Closure Device \$359.5i		, v	
Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel 93593 Connections, Using Imaging Guidance Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel 93594 Connections, Using Imaging Guidance Price By Report 1 Insertion Of Catheter Into Left Side Of Heart For Evaluation Of Congenital Heart Defect, Using Maging Guidance Price By Report 1 Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel 93596 Connections, Using Imaging Guidance Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel 93597 Connections, Using Imaging Guidance Price By Report		, ,	\$359.58
Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel 93594 Connections, Using Imaging Guidance 93595 Insertion Of Catheter Into Left Side Of Heart For Evaluation Of Congenital Heart Defect, Using Maging Guidance Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel 93596 Connections, Using Imaging Guidance Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel 93597 Connections, Using Imaging Guidance Price By Report		Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel	
93595 Insertion Of Catheter Into Left Side Of Heart For Evaluation Of Congenital Heart Defect, Using Maging Guidance Price By Report Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel Price By Report Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel Price By Report Connections, Using Imaging Guidance Pri		Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel	
Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel 93596 Connections, Using Imaging Guidance Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel 93597 Connections, Using Imaging Guidance Price By Report			Price By Report
93596 Connections, Using Imaging Guidance Price By Report Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel 93597 Connections, Using Imaging Guidance Price By Report	93595		Price By Report
93597 Connections, Using Imaging Guidance Price By Report	93596	Connections, Using Imaging Guidance	Price By Report
93598 Measurement Of Output Of Blood From Heart, Performed During Cardiac Catheterization For Evaluation Of Congenital Heart Defects Price By Repo	93597	· · · · · · · · · · · · · · · · · · ·	Price By Report
	93598	Measurement Of Output Of Blood From Heart, Performed During Cardiac Catheterization For Evaluation Of Congenital Heart Defects	Price By Report

Cada	Description	F
	Description Insertion Of Catheter For Recording Upper Heart Rhythm (Bundle Of His)	Fee \$265.58
	Insertion Of Catheter For Recording Upper Heart Rhythm (Intra-Atrial)	\$190.08
	Right Ventricular Recording	\$225.87
33003	Intraventricular And/Or Intra-Atrial Mapping Of Tachycardia Site(S) With Catheter Manipulation To Record From Multiple Sites To Identify Origin	Ψ223.01
93609	Of Tachycardia (List Separately In Addition To Code For Primary Procedure)	\$638.43
	Intra-Atrial Pacing	\$254.37
	Intraventricular Pacing	\$265.11
	Intracardiac Electrophysiologic 3-Dimensional Mapping (List Separately In Addition To Code For Primary Procedure)	\$286.92
	Esophageal Recording Of Atrial Electrogram With Or Without Ventricular Electrogram(S)	\$62.96
	Esophageal Recording of Atrial Electrogram With Or Without Ventricular Electrogram(S) With Pacing	\$120.71
	Induction Of Arrhythmia By Electrical Pacing	\$522.39
93010		ψ0ZZ.39
00040	Comprehensive Electrophysiologic Evaluation With Right Atrial Pacing And Recording, Right Ventricular Pacing And Recording, His Bundle	00000
	Recording, Including Insertion And Repositioning Of Multiple Electrode Catheters, Without Induction Or Attempted Induc	\$969.97
	Insertion Of Catheters For Recording, Pacing, And Attempted Induction Of Abnormal Rhythm In Right Upper And Lower Heart	\$1,284.91
	Insertion Of Catheters For Recording, Pacing, And Attempted Induction Of Abnormal Rhythm In Left Upper Heart	\$4,978.87
	Insertion Of Catheters For Recording, Pacing, And Attempted Induction Of Abnormal Rhythm In Left Lower Heart	\$189.29
	Programmed Stimulation And Pacing After Intravenous Drug Infusion (List Separately In Addition To Code For Primary Procedure)	\$173.82
93624	Insertion Of Catheters For Assessment Of Heart Pacing, Recording, Or Attempted Induction Of Abnormal Rhythm	\$372.50
	Intra-Operative Epicardial And Endocardial Pacing And Mapping To Localize The Site Of Tachycardia Or Zone Of Slow Conduction For Surgical	
93631	Correction	\$751.35
	Electrophysiologic Evaluation Of Single Or Dual Chamber Pacing Cardioverter-Defibrillator Leads Including Defibrillation Threshold Evaluation	
93640	(Induction Of Arrhythmia, Evaluation Of Sensing And Pacing For Arrhythmia Termination) At Time Of Init	\$660.48
	Electrophysiologic Evaluation Of Single Or Dual Chamber Pacing Cardioverter-Defibrillator Leads Including Defibrillation Threshold Evaluation	
	(Induction Of Arrhythmia, Evaluation Of Sensing And Pacing For Arrhythmia Termination) At Time Of Init	\$754.88
93642	Evaluation Of Single Or Dual Chamber Pacing Cardioverter-Defibrillator With Programming Or Reprogramming	\$303.12
93644	Evaluation Implantable Defibrillator	\$184.71
	Intracardiac Catheter Ablation Of Atrioventricular Node Function, Atrioventricular Conduction For Creation Of Complete Heart Block, With Or	
93650	Without Temporary Pacemaker Placement	\$573.35
93653	Evaluation And Insertion Of Catheters For Creation Of Complete Heart Block	\$808.97
	Evaluation And Insertion Of Catheters For Recording, Pacing, And Attempted Induction Of Abnormal Heart Rhythm	\$1,081.95
	Insertion Of Catheters And Destruction Of Tissue To Treat Abnormal Heart Rhythm	\$302.11
	Evaluation And Insertion Of Catheters For Recording, Pacing, And Treatment Of Abnormal Heart Rhythm	\$1,085.34
00000	Additional Linear Or Focal Intracardiac Catheter Ablation Of The Left Or Right Atrium For Treatment Of Atrial Fibrillation Remaining After	ψ1,000.01
93657	Completion Of Pulmonary Vein Isolation (List Separately In Addition To Code For Primary Procedure)	\$301.75
00001	Evaluation Of Cardiovascular Function With Tilt Table Evaluation, With Continuous Ecg Monitoring And Intermittent Blood Pressure Monitoring,	φοσττο
03660	With Or Without Pharmacological Intervention	\$167.81
93000	Intracardiac Echocardiography During Therapeutic/Diagnostic Intervention, Including Imaging Supervision And Interpretation (List Separately In	\$107.01
02662	Addition To Code For Primary Procedure)	¢152.46
	Peripheral Arterial Disease (Pad) Rehabilitation Per Session	\$153.46 \$13.19
	reliptieral Attelial Disease (Fau) Reliabilitation Fel Session	\$13.19
	Pigimpadanas Dariyad Physiologia Cardioyagaylar Analysia	ተባር ባር
93701	Bioimpedance-Derived Physiologic Cardiovascular Analysis	\$26.28
	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And	
93724	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)	\$300.35
93724	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies	
93724 93740	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes	\$300.35 \$0.01
93724 93740	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies	\$300.35
93724 93740	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat	\$300.35 \$0.01
93724 93740 93745	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device	\$300.35 \$0.01 Price By Report
93724 93740 93745 93750	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status	\$300.35 \$0.01 Price By Report \$51.17
93724 93740 93745 93750 93770	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure	\$300.35 \$0.01 Price By Report \$51.17 \$0.01
93724 93740 93745 93750 93770 93784	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report	\$300.35 \$0.01 Price By Report \$51.17 \$0.01 \$48.34
93724 93740 93745 93750 93770 93784 93786	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only	\$300.35 \$0.01 Price By Report \$51.17 \$0.01 \$48.34 \$24.11
93724 93740 93745 93750 93770 93784 93786 93788	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report	\$300.35 \$0.01 Price By Report \$51.17 \$0.01 \$48.34 \$24.11 \$5.21
93724 93740 93745 93750 93770 93784 93786 93788	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report	\$300.35 \$0.01 Price By Report \$51.17 \$0.01 \$48.34 \$24.11
93724 93740 93745 93750 93770 93784 93786 93788 93790	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per	\$300.35 \$0.01 Price By Report \$51.17 \$0.01 \$48.34 \$24.11 \$5.21 \$19.03
93724 93740 93745 93750 93770 93784 93786 93788 93790	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)	\$300.35 \$0.01 Price By Report \$51.17 \$0.01 \$48.34 \$24.11 \$5.21
93724 93740 93745 93750 93770 93784 93786 93788 93790	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session) Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per	\$300.35 \$0.01 Price By Report \$51.17 \$0.01 \$48.34 \$24.11 \$5.21 \$19.03
93724 93740 93745 93750 93770 93784 93786 93788 93790 93797	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session) Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per Session)	\$300.35 \$0.01 Price By Report \$51.17 \$0.01 \$48.34 \$24.11 \$5.21 \$19.03 \$15.60
93724 93740 93745 93750 93770 93784 93786 93788 93790 93797	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session) Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per Session) Unlisted Cardiovascular Service Or Procedure	\$300.35 \$0.01 Price By Report \$51.17 \$0.01 \$48.34 \$24.11 \$5.21 \$19.03 \$15.60 \$24.43 Price By Report
93724 93740 93745 93750 93770 93784 93786 93798 93797 93798 93799 93880	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session) Unlisted Cardiovascular Service Or Procedure Duplex Scan Of Extracranial Arteries; Complete Bilateral Study	\$300.35 \$0.01 Price By Report \$51.17 \$0.01 \$48.34 \$24.11 \$5.21 \$19.03 \$15.60 \$24.43 Price By Report \$206.92
93724 93740 93745 93750 93770 93784 93786 93788 93790 93797 93798 93798 93880 93880	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session) Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per Session) Unlisted Cardiovascular Service Or Procedure Duplex Scan Of Extracranial Arteries; Complete Bilateral Study Duplex Scan Of Extracranial Arteries; Unilateral Or Limited Study	\$300.35 \$0.01 Price By Report \$51.17 \$0.01 \$48.34 \$24.11 \$5.21 \$19.03 \$15.60 \$24.43 Price By Report \$206.92 \$134.62
93724 93740 93745 93750 93770 93784 93786 93788 93790 93797 93798 93799 93880 93882	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status) Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session) Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per Session) Unlisted Cardiovascular Service Or Procedure Duplex Scan Of Extracranial Arteries; Complete Bilateral Study Transcranial Doppler Study Of The Intracranial Arteries; Complete Study	\$300.35 \$0.01 Price By Report \$51.17 \$0.01 \$48.34 \$24.11 \$5.21 \$19.03 \$15.60 \$24.43 Price By Report \$206.92 \$134.62 \$192.60
93724 93740 93745 93750 93770 93784 93786 93798 93799 93892 93880 93882 93886 93888	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status) Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session) Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per Session) Unlisted Cardiovascular Service Or Procedure Duplex Scan Of Extracranial Arteries; Complete Bilateral Study Duplex Scan Of Extracranial Arteries; Unilateral Or Limited Study Transcranial Doppler Study Of The Intracranial Arteries; Limited Study Transcranial Doppler Study Of The Intracranial Arteries; Limited Study	\$300.35 \$0.01 Price By Report \$51.17 \$0.01 \$48.34 \$24.11 \$5.21 \$19.03 \$15.60 \$24.43 Price By Report \$206.92 \$134.62 \$192.60 \$171.77
93724 93740 93745 93750 93770 93784 93786 93788 93790 93797 93798 93890 93882 93886 93888	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status) Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session) Unlisted Cardiovascular Service Or Procedure Duplex Scan Of Extracranial Arteries; Complete Bilateral Study Duplex Scan Of Extracranial Arteries; Unilateral Or Limited Study Transcranial Doppler Study Of The Intracranial Arteries; Limited Study Transcranial Doppler Study Of The Intracranial Arteries; Vasoreactivity Study	\$300.35 \$0.01 Price By Report \$51.17 \$0.01 \$48.34 \$24.11 \$5.21 \$19.03 \$15.60 \$24.43 Price By Report \$206.92 \$134.62 \$171.77 \$268.09
93724 93740 93745 93750 93770 93784 93786 93790 93797 93799 93880 93882 93886 93888 93890	Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session) Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per Session) Unlisted Cardiovascular Service Or Procedure Duplex Scan Of Extracranial Arteries; Complete Bilateral Study Duplex Scan Of Extracranial Arteries; Unilateral Or Limited Study Transcranial Doppler Study Of The Intracranial Arteries; Complete Study Transcranial Doppler Study Of The Intracranial Arteries; Wasoreactivity Study Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection Without Intravenous Microbubble Injection	\$300.35 \$0.01 Price By Report \$51.17 \$0.01 \$48.34 \$24.11 \$5.21 \$19.03 \$15.60 \$24.43 Price By Report \$206.92 \$134.62 \$192.60 \$171.77 \$268.09 \$169.06
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93724 93740 93745 93750 93770 93784 93786 93798 93799 93892 93882 93886 93888 93890 93892 93892 93923 93923 93923 93931 93931	Electronic Analysis Of Antitiachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings) Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session) Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per Session) Unlisted Cardiovascular Service Or Procedure Duplex Scan Of Extracranial Arteries; Complete Bilateral Study Duplex Scan Of Extracranial Arteries; Unilateral Or Limited Study Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection Without Intravenous Microbubble Injection Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection With Intravenous Microbubble Injection Ultrasound Study Of Arteries Of Both Arms And Legs, Complete Ultrasound Study Of Arteries Of Both Arms And Legs, Complete Sulvas Arterial Bypass Grafts;	\$300.35 \$0.01 Price By Report \$51.17 \$0.01 \$48.34 \$24.11 \$5.21 \$19.03 \$15.60 \$24.43 Price By Report \$206.92 \$134.62 \$192.60 \$171.77 \$268.09 \$169.06 \$169.07 \$134.92 \$134.92 \$134.92 \$134.92 \$134.92 \$134.93
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Code	Description	Fee
	Ultrasound Scan Of Blood Flow Of Aorta, Vena Cava, Bypass Graphs, Or One Side Of The Groin Or Limited Scan	\$126.61
	Duplex Scan Of Arterial Inflow And Venous Outflow Of Penile Vessels; Complete Study	\$111.10
93981	Duplex Scan Of Arterial Inflow And Venous Outflow Of Penile Vessels; Follow-Up Or Limited Study	\$67.05
00005	Illuserant Con Of Diand Flaville Fatters in On Dath Cides Of Dady For December 10 Accordance Of Diand Vessel For District	#000.00
	Ultrasound Scan Of Blood Flow In Extremity On Both Sides Of Body For Preoperative Assessment Of Blood Vessel For Dialysis Access Ultrasound Scan Of Blood Flow In Extremity On One Side For Preoperative Assessment Of Blood Vessel For Dialysis Access	\$280.69
	Duplex Scan Of Hemodialysis Access (Including Arterial Inflow, Body Of Access And Venous Outflow)	\$141.37 \$118.55
	Unlisted Noninvasive Vascular Diagnostic Study	Price By Report
	Ventilation Assistance And Management, Hospital Inpatient Or Observation, Initial Day	\$94.20
	Ventilation Assistance And Management, Hospital Inpatient Or Observation, Each Subsequent Day	\$66.43
	Evaluation Of Home Ventilator Management Care Plan, 30 Minutes Or More	\$80.71
	Spirometry, Including Graphic Record, Total And Timed Vital Capacity, Expiratory Flow Rate Measurement(S), With Or Without Maximal	*
94010	Voluntary Ventilation	\$28.23
94011	Measurement And Graphic Recording Of Total And Timed Exhaled Air Capacity, Infant Or Child Through 2 Years Of Age	\$79.74
	Measurement And Graphic Recording Of Total And Timed Exhaled Air Capacity Before And After Medication Administration, Infant Or Child	
	Through 2 Years Of Age	\$130.14
94013	Measurement Of Remaining Air Or Lung Capacity After Exhalation, Infant Or Child Through 2 Years Of Age	\$17.79
	Measurement And Graphic Recording Of Amount And Speed Of Breathed Air Including Transmission Of Tracing, Analysis, Recalibration Of	
94014	Device, Physician Review And Interpretation Over 30 Days	\$52.33
0.4045	Patient Initiated Spirometric Recording Per 30 Day Period Of Time; Recording (Includes Hook-Up, Reinforced Education, Data Transmission,	400.00
94015	Data Capture, Trend Analysis, And Periodic Recalibration)	\$29.22
04016	Patient-Initiated Spirometric Recording Per 30-Day Period Of Time; Review And Interpretation Only By A Physician Or Other Qualified Health Care Professional	¢22 11
	Measurement And Graphic Recording Of The Amount And Speed Of Breathed Air, Before And Following Medication Administration	\$23.11 \$41.32
34000	The desired the stability of the Annual Canada Speed of Deadlier All, Delute And Following Medication Authinistiation	φ41.32
94070	Multiple Measurements And Graphic Recordings Of The Amount And Speed Of Breathed Air, Before And Following Medication Administration	\$65.43
	Vital Capacity, Total (Separate Procedure)	\$0.01
	Maximum Breathing Capacity, Maximal Voluntary Ventilation	\$14.29
	Respiratory Diagnostic Testing (Flow Volume Loop)	\$37.16
94450	Breathing Response To Hypoxia (Hypoxia Response Curve)	\$73.94
94452	High Altitude Simulation Test (Hast), With Interpretation And Report By A Physician Or Other Qualified Health Care Professional;	\$47.00
	High Altitude Simulation Test (Hast), With Interpretation And Report By A Physician Or Other Qualified Health Care Professional; With	
	Supplemental Oxygen Titration	\$63.79
	Intrapulmonary Surfactant Administration By A Physician Or Other Qualified Health Care Professional Through Endotracheal Tube	\$56.73
	Exercise Test For Spasm Of Lung Airways With Ekg	\$93.77
	Test For Exercise-Induced Lung Stress	\$35.86
	Exercise Test For Spasm Of Lung Airways	\$68.76
	Test For Exercise-Induced Heart And Lung Stress	\$172.54
	Professional Services For Outpatient Pulmonary Rehabilitation, Per Session	\$51.98
	Professional Services For Outpatient Pulmonary Rehabilitation With Continuous Monitoring Of Blood Oxygen, Per Session	\$69.37
	Respiratory Inhaled Pressure Or Nonpressure Treatment To Relieve Airway Obstruction Or For Sputum Specimen Aerosol Inhalation Of Pentamidine For Pneumocystis Carinii Pneumonia Treatment Or Prophylaxis	\$11.75
	Respiratory Inhaled Aerosol Treatment To Relieve Airway Obstruction, First Hour	\$25.81 \$59.30
	Continuous Inhalation Treatment With Aerosol Medication For Acute Airway Obstruction; Each Additional Hour	\$15.16
	Continuous Positive Airway Pressure Ventilation (Cpap), Initiation And Management	\$59.99
	Continuous Negative Pressure Ventilation (Crp), Initiation And Management	\$32.84
0.002	Demonstration And/Or Evaluation Of Patient Use Of Aerosol Generator, Nebulizer, Metered Dose Inhaler Or Intermittent Positive Pressure	ψ0 <u>2.</u> 0 1
94664	Breathing (lppb) Device	\$15.62
	Manipulation Chest Wall, Such As Cupping, Percussing, And Vibration To Facilitate Lung Function Initial Demonstration And/Or Evaluation	\$21.08
94668	Manipulation Chest Wall, Such As Cupping, Percussing, And Vibration To Facilitate Lung Function Subsequent	\$33.59
	Mechanical Chest Wall Manipulation For Improvement In Lung Function	\$17.56
	Oxygen Uptake, Expired Gas Analysis Rest And Exercise, Direct, Simple	\$42.12
	Oxygen Uptake, Expired Gas Analysis Including Co2 Output, Percentage Oxygen Extracted	\$51.48
	Oxygen Uptake, Expired Gas Analysis Rest, Indirect (Separate Procedure)	\$30.38
	Plethysmography For Determination Of Lung Volumes And, When Performed, Airway Resistance	\$57.79
	Gas Dilution Or Washout For Determination Of Lung Volumes And, When Performed, Distribution Of Ventilation And Closing Volumes	\$46.40
	Measurement Of Airway Resistance By Impulse Oscillometry	\$37.84
	Diffusing Capacity (Eg, Carbon Monoxide, Membrane) (List Separately In Addition To Code For Primary Procedure)	\$62.39
	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation Single Determination	\$2.42
	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation Multiple Determinations (Eg, During Exercise)	\$3.39
	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation By Continuous Overnight Monitoring (Separate Procedure)	\$28.11
94/12	Measurement And Recording Of Breathing Pattern Over 12-24 Hours, Infant Pediatric Home Monitoring Of Breathing Pauses During Sleep, Including Breathing And Heart Rate, 30-Day Time Period, With Physician	\$74.35
94774	Interpretation And Report	Price By Report
34774	interpretation with troport	Trice by Report
94775	Attachment And Disconnection Of Pediatric Home Monitoring Device For Detection Of Breathing Pauses During Sleep, 30-Day Time Period	Price By Report
	Pediatric Home Monitoring Of Breathing Pauses During Sleep, Including Breathing And Heart Rate, Receipt Of Transmissions And Computer	=)
94776	Analysis, 30-Day Time Period	Price By Report
	Pediatric Home Monitoring Of Breathing Pauses During Sleep, Including Breathing And Heart Rate, Physician Review And Interpretation, 30-	, .,
94777	Day Time Period	\$29.99
	Unlisted Pulmonary Service Or Procedure	Price By Report
	Injection Of Allergenic Extracts Into Skin, Accessed Through The Skin	\$4.13
95004		
	Nitric Oxideexpired Gas Determanation	\$20.02
95012	, ,	\$20.02 \$9.21
95012 95017	Nitric Oxideexpired Gas Determanation	

Code	Description Introduction Control of Mith Allorage is Extracts. Immediate Type Praction, Including Test Interpretation and Preset Specify.	Fee
95024	Intracutaneous (Intradermal) Tests With Allergenic Extracts, Immediate Type Reaction, Including Test Interpretation And Report, Specify Number Of Tests	\$7.27
95027	Intracutaneous (Intradermal) Tests, Sequential And Incremental, With Allergenic Extracts For Airborne Allergens, Immediate Type Reaction, Including Test Interpretation And Report, Specify Number Of Tests	\$4.68
	Intracutaneous (Intradermal) Tests With Allergenic Extracts, Delayed Type Reaction, Including Reading, Specify Number Of Tests	\$8.96
	Patch Or Application Test(S) (Specify Number Of Tests)	\$5.21
	Application Of Allergenic Extract Skin Patch, Exposure To Ultraviolet Light, And Reaction Analysis	\$6.01
95056	Photo Tests	\$47.21
	Ophthalmic Mucous Membrane Tests	\$35.11
	Direct Nasal Mucous Membrane Test	\$25.95
	Inhalation Of Medications With Allergic Reaction Analysis	\$37.67
95076	Ingestion Of Test Items For Allergies, 120 Minutes Ingestion Challenge Test (Seguential And Incremental Ingestion Of Test Items, Eq. Food, Drug Or Other Substance); Each Additional 60	\$125.88
95079	Minutes Of Testing (List Separately In Addition To Code For Primary Procedure)	\$88.57
	Professional Services For Allergen Immunotherapy Not Including Provision Of Allergenic Extracts Single Injection	\$9.93
	Injection Of Incremental Dosages Of Allergen, 2 Or More Injections	\$12.12
	Professional Services For The Supervision Of Preparation And Provision Of Antigens For Allergen Immunotherapy; Single Dose Vial(S)	
95144	(Specify Number Of Vials)	\$16.14
05445	Professional Services For The Supervision Of Preparation And Provision Of Antigens For Allergen Immunotherapy (Specify Number Of Doses);	#22.44
95145	Single Stinging Insect Venom Professional Services For The Supervision And Provision Of Antigens For Allergen Immunotherapy (Specify Number Of Doses); Two Single	\$33.14
95146	Stinging Insect Venoms	\$44.69
	Professional Services For The Supervision And Provision Of Antigens For Allergen Immunotherapy (Specify Number Of Doses); Three Single	
95147	Stinging Insect Venoms Professional Services For The Supervision And Provision Of Antigens For Allergen Immunotherapy (Specify Number Of Doses); Four Single	\$58.65
95148	Stinging Insect Venoms	\$87.10
33140	Professional Services For The Supervision And Provision Of Antigens For Allergen Immunotherapy (Specify Number Of Doses); Five Single	ψ07.10
95149	Stinging Insect Venoms	\$104.72
	Professional Services For The Supervision Of Preparation And Provision Of Antigens For Allergen Immunotherapy; Single Or Multiple Antigens	
95165	(Specify Number Of Doses)	\$12.03
05170	Professional Services For The Supervision And Provision Of Antigens For Allergen Immunotherapy; Whole Body Extract Of Biting Insect Or Other Arthropod (Specify Number Of Doses)	\$10.91
	Rapid Desensitization Procedure, Each Hour	\$128.56
	Unlisted Allergy/Clinical Immunologic Service Or Procedure	Price By Report
	Continuous Monitoring Of Glucose In Tissue Fluid Using Sensor Under Skin	\$55.71
95250	Ambulatory Continuous Glucose (Sugar) Monitoring For A Minimum Of 72 Hours	\$140.40
	Ambulatory Continuous Glucose (Sugar) Including Interpretation And Report For A Minimum Of 72 Hours	\$36.11
	Measurement Of Brain Wave Activity (Eeg), Continuous	\$246.99
	Measurement Of Brain Wave Activity (Eeg), 2-12 Hours, Unmonitored	\$222.24
	Measurement Of Brain Wave Activity (Eeg), 2-12 Hours, With Intermittent Monitoring And Maintenance	\$361.43
	Measurement Of Brain Wave Activity (Eeg), 2-12 Hours, With Continuous, Real-Time Monitoring And Maintenance Measurement Of Brain Wave Activity (Eeg), 12-26 Hours, Unmonitored	\$377.95 \$277.88
	Measurement Of Brain Wave Activity (Eeg), 12-26 Hours, With Intermittent Monitoring And Maintenance	\$694.92
	Measurement Of Brain Wave Activity (Eeg), 12-26 Hours, With Continuous, Real-Time Monitoring And Maintenance	\$882.22
	Measurement Of Brain Wave Activity With Video (Veeg), 2-12 Hours, Unmonitored	\$222.24
95712	Measurement Of Brain Wave Activity With Video (Veeg), 2-12 Hours With Intermittent Monitoring And Maintenance	\$417.06
	Measurement Of Brain Wave Activity With Video (Veeg), 2-12 Hours With Continuous, Real-Time Monitoring And Maintenance	\$504.05
	Measurement Of Brain Wave Activity With Video (Veeg), 12-26 Hours, Unmonitored	\$277.88
	Measurement Of Brain Wave Activity With Video (Veeg), 12-26 Hours, With Intermittent Monitoring And Maintenance	\$778.00
95716	Measurement Of Brain Wave Activity With Video (Veeg), 12-26 Hours, With Continuous, Real-Time Monitoring And Maintenance	\$1,071.02
95717	Continuous Measurement Of Brain Wave Activity (Eeg), 2-12 Hours, With Health Care Professional Analysis, Interpretation And Report	\$106.26
	Continuous Measurement Of Brain Wave Activity With Video (Veeg), 2-12 Hours, With Health Care Professional Analysis, Interpretation And	
95718	Report	\$139.47
95719	Continuous Measurement Of Brain Wave Activity (Eeg), 12-26 Hours, With Health Care Professional Analysis, Interpretation And Report	\$163.95
00710	Continuous Measurement Of Brain Wave Activity With Video (Veeg), 12-26 Hours, With Health Care Professional Analysis, Interpretation And	ψ100.00
95720	Report	\$215.82

95721	Continuous Measurement Of Brain Wave Activity (Eeg), 37-60 Hours, With Health Care Professional Analysis, Interpretation And Report Continuous Measurement Of Brain Wave Activity With Video (Veeg), 37-60 Hours, With Health Care Professional Analysis, Interpretation And	\$217.73
95722	Report	\$263.96
00122	· · · · · · · · · · · · · · · · · · ·	Ψ200.00
95723	Continuous Measurement Of Brain Wave Activity (Eeg), 61-84 Hours, With Health Care Professional Analysis, Interpretation And Report	\$238.02
	Continuous Measurement Of Brain Wave Activity With Video (Veeg), 61-84 Hours, With Health Care Professional Analysis, Interpretation And	
95724	Report Continuous Measurement Of Brain Wave Activity With (Eeg), More Than 84 Hours, With Health Care Professional Analysis, Interpretation And	\$337.24
95725	Report	\$273.59
00.20	Continuous Measurement Of Brain Wave Activity With Video (Veeg), More Than 84 Hours, With Health Care Professional Analysis,	Ψ2. 0.00
95726	Interpretation And Report	\$426.13
95782	Polysomnography; Younger Than 6 Years, Sleep Staging With 4 Or More Additional Parameters Of Sleep, Attended By A Technologist	\$1,008.38
	Polysomnography; Younger Than 6 Years, Sleep Staging With 4 Or More Additional Parameters Of Sleep, With Initiation Of Continuous Positive	. ,
95783	Airway Pressure Therapy Or Bi-Level Ventilation, Attended By A Technologist	\$1,068.09
l	Multiple Sleep Latency Or Maintenance Of Wakefulness Testing, Recording, Analysis And Interpretation Of Physiological Measurements Of	
	Sleep During Multiple Trials To Assess Sleepiness Ungstronded Sleep Study With Recording Of Heart Rate Overgon, Recoiratory Aidflow And Effort	\$333.85
90806	Unattended Sleep Study With Recording Of Heart Rate, Oxygen, Respiratory Airflow And Effort Sleep Study, Simultaneous Recording Of Ventilation, Respiratory Effort, Ecg Or Heart Rate, And Oxygen Saturation, Attended By A	\$96.68
05807	Technologist	\$311.43

98000 Polysomrography, Any Age, Steve Disagrey (Win 13 Additional Parameters Of Steps, Attended by A Technologist 9610 Polysomrography, Age of Version Collect. Seep Stagrey With 4 Of More Additional Parameters Of Steps, Attended by A Technologist 9611 Answer Protestor Technology (Collect.) Seep Stagrey With 4 Of More Additional Parameters Of Steps, With Indistrian Of Continuous Proteoter 9612 Answer Protestor Technology (Collect.) Seep Stagrey With 4 Of More Additional Parameters Of Steps, With Indistrian Of Continuous Proteoter 9613 Answer Protestor Technology (Collect.) Seep Stagrey With 4 Of More Additional Parameters Of Steps, With Indistrian Of Continuous Proteoter 9614 Answer Protestor And Recording Of Stems With (Collect.) Answer And Additional Parameters Of Stems (Collect.) Seep Stagrey Stagrey Stagrey Stagrey (Collect.) Seep Stagrey			
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85810 Needle Measurement And Recording Of Electrical Activity Of Muscles Of Arm Or Leg. 1 Extremities \$140.45 85881 Needle Measurement And Recording Of Electrical Activity Of Muscles Of Arm (S) or Leg(S), 2 Extremities \$20.73 85881 Needle Measurement And Recording Of Electrical Activity Of Muscles Of Arm (S) or Leg(S), 3 Extremities \$22.73 85886 Needle Electromyography: Lanynx \$141.43 85865 Needle Electromyography: Lanynx \$141.43 85865 Needle Electromyography: Lanynx \$141.43 85865 Needle Electromyography: Lanynx \$141.43 85866 Needle Electromyography: Carnal Merve Supplied Muscles (D) (Arm (S) Or Leg(S), 4 Extremities \$131.43 85867 Needle Electromyography: Carnal Merve Supplied Muscles, (Baleara) \$131.63 85867 Needle Electromyography: Carnal Merve Supplied Muscles, (Baleara) \$131.63 85867 Needle Electromyography: Carnal Merve Supplied Muscles, (Baleara) \$131.63 85867 Needle Electromyography: Carnal Merve Supplied Muscles, (Baleara) \$131.63 85867 Needle Electromyography: Carnal Merve Supplied Muscles, (Baleara) \$131.63 85867 Needle Electromyography: Carnal Merve Supplied Muscles, (Baleara) \$131.63 85867 Needle Electromyography: Carnal Merve Supplied Muscles, (Baleara) \$131.63 85867 Needle Electromyography: Carnal Merve Supplied Muscles, (Baleara) \$131.63 85867 Needle Electromyography: Sangle Fiber Electrode, With Cuantitative Measurement Of Jater, Blocking And/Or Fiber Demaity, Any/MI Sites \$18667 Needle Electromyography for Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Pimary Procedure) \$18667 Needle Electromyography For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Pimary Procedure) \$18768 Needle Electromyography, Eart Extremity, With Related Paraspiral Areas, When Performed, Done With Nerve Conduction, Ampitude And \$18868 Letterony/Verboly, Subdy, List Bergers of Addition To Code For Pimary Procedure) \$18868 Letterony/Verboly, Subdy, List Separately in Addition To Code For Pimary Procedure)			· · · · · · · · · · · · · · · · · · ·
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95868 Needle Electromyography, Canala Neve Supplied Muscles (Excluding 11 of 112) 95870 Needle Measurement And Recording of Electrical Activity Of Muscles in Arm Or Leg Or Muscles in Trunk Or Head, Limited Study 95871 Needle Electromyography Lipids Signife Fiber Electrode, With Quantitative Measurement Of Jitter, Blocking And/Or Fiber Density, Anny/Al Sites 95872 OF Electrical Simulation For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 95874 Needle Electromyography For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 95874 Needle Electromyography For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 95875 Electrical Simulation For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 95876 Electrical Simulation For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 95877 Electromyography For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 95878 Electromyography For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 95879 Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And Separately in Addition To Code For Primary Procedure) 95886 Electromyography, Ron-Extremity (Cranial Nerve Supplied Cri. Avid Muscles (S) Done With Nerve Conduction, Amplitude And Separately in Addition To Code For Primary Procedure) 95871 Electromyography, Non-Extremity (Cranial Nerve Supplied Cri. Avid Muscles (S) Done With Nerve Conduction, Amplitude And Separately in Addition To Code For Primary Procedure) 95872 Electromyography, Non-Extremity (Cranial Nerve Supplied Cri. Avid Muscles (S) Done With Nerve Conduction, Amplitude And Separately in Addition To Code For Primary Procedure)	95866	Needle Electromyography; Hemidiaphragm	\$114.32
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98870 Needle Measurement And Recording Of Electrical Activity Of Muscles in Arm Or Leg Of Muscles in Trunk Of Head, Limited Study Needle Electromyography Using Single Fiber Electrode, With Quantitative Measurement Of Jitter, Blocking And/Or Fiber Density, Any/All Sites 98872 Of Each Muscle Studied \$20,26 98873 Electrical Stimulation For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) \$55.1,5 98874 Needle Electromyography For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) \$57.1 98875 Ischmeit Limb Exercise a Tesming (3) Aquisition For Muscle (S) Madebolite (S) Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And 98886 Latency/Velocity Study, Complete, Five Or More Muscles Studied, Innervated By Three Or More Nerves Or Four Or More Spinal Levels (Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And 98886 Latency/Velocity Study, Complete, Five Or More Muscles Studied, Innervated By Three Or More Nerves Or Four Or More Spinal Levels (Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And 98887 Latency/Velocity Study, Literal Nerve Supplied Or Axiall Muscles (S) Done With Nerve Conduction, Amplitude And 98888 Latency/Velocity Study (List Separately in Addition To Code For Primary Procedure) 98989 Nerve Transmission Studies, 3-4 Studies 98990 Nerve Transmission Studies, 3-4 Studies 98990 Nerve Transmission Studies, 5-4 Studies 98910 Nerve Transmission Studies, 7-8 Studies 98910 Nerve Transmission Studies,			\$131.63
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98873 Electrical Stimulation For Guidance In Conjunction With Chemodenervation (List Separately In Addition To Code For Primary Procedure) 98874 Needle Electromyography For Guidance In Conjunction With Chemodenervation (List Separately In Addition To Code For Primary Procedure) 98875 Isohemic Limb Exercise Test With Serial Specimen(S) Acquisition For Muscle(S) Metabolite(S) 98885 Latency/Velocity, Study: Limited (List Separately In Addition To Code For Primary Procedure) 98885 Latency/Velocity, Study: Limited (List Separately In Addition To Code For Primary Procedure) 98886 Latency/Velocity, Study: Limited (List Separately In Addition To Code For Primary Procedure) 98886 Latency/Velocity, Study: Complete, Five Or More Muscles Studied, Innevated By Three Or More Nerve Conduction, Amplitude And Separately In Addition To Code For Primary Procedure) 98886 Latency/Velocity, Study: Limited (List Separately In Addition To Code For Primary Procedure) 98886 Latency/Velocity, Study: Limited (List Separately) In Addition To Code For Primary Procedure) 98886 Latency/Velocity, Study: Limited (List Separately In Addition To Code For Primary Procedure) 98887 Latency/Velocity, Study: Limited (Primary Procedure) 98887 Latency/Velocity, Study: Limited (Separately In Addition To Code For Primary Procedure) 98897 Lever Transmission Studies 1-12 Studies 98997 Nerve Transmission Studies, 5-16 Studies 98991 Nerve Transmission Studies, 5-16 Studies 98991 Nerve Transmission Studies, 5-10 Studies 98991	05070		¢202.00
99874 Needle Electromyography For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 98875 Sischemic Limb Exercise Test With Serial Specimen(S) Acquisition For Muscle(S) Metabolite(S) 98885 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98885 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98885 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98886 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98886 Latency/Velocity Study; Complete, Five Or More Muscles Studied, Innervated By Three Of More Nevers Or For Ordination, Amplitude And 98886 Latency/Velocity Study; Complete, Five Or More Muscles Studied, Innervated By Three Or More Nevers Or For Ordination, Amplitude And 98886 Latency/Velocity Study; Complete, Five Or More Muscles Studied, Innervated By Three Or More Nevers Or For Ordination, Amplitude And 98887 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98887 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98887 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98987 Needle Measurement And Recording Of Movement And/Or Feeling Of Arm Or Leg With Interpretation And Report 98987 Needle Measurement And Recording Of Movement And/Or Feeling Of Arm Or Leg With Interpretation And Report 98997 Neeve Transmission Studies, 3-13 Studies 98910 Neeve Transmission Studies, 5-6 Studies 98911 Neeve Transmission Studies, 5-6 Studies 98911 Neeve Transmission Studies, 9-10 Studies 98911 Neeve Transmission Studies, 9-10 Studies 98911 Neeve Transmission Studies, 9-10 Studies 98912 Neeve Transmission Studies, 13-0 More Studies 98913 Neeve Transmission Studies, 13-0 More Studies 98913 Neeve Transmission Studies, 13-0 More Studies 98913 Neeve Transmission Studies, 13-0 More Studi	95072	Or Each Muscle Studied	\$202.00
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98875 (Schemic Limb Exercise Test With Serial Specimen(S) Acquisition For Muscle(S) Metabolite(S) Needde Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And Report Serial Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And Response Areas, When Performed, Done With Nerve Conduction, Amplitude And Response Areas, When Performed, Done With Nerve Conduction, Amplitude And Serial Electromyography, Non-Extremity (With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And Serial Electromyography, Non-Extremity (Cranial Nerve Suppled Or Axia) Muscle(S) Done With Nerve Conduction, Amplitude And Serial Electromyography, Non-Extremity (Cranial Nerve Suppled Or Axia) Muscle(S) Done With Nerve Conduction, Amplitude And Serial Electromyography, Non-Extremity (Cranial Nerve Suppled Or Axia) Muscle(S) Done With Nerve Conduction, Amplitude And Serial Electromyography, Non-Extremity (Cranial Nerve Suppled Or Axia) Muscle(S) Done With Nerve Conduction, Amplitude And Serial Electromyography, Non-Extremity (Cranial Nerve Suppled Or Axia) Muscle(S) Done With Nerve Conduction, Amplitude And Serial Electromyography, Non-Extremity (Cranial Nerve Suppled Or Axia) Muscle(S) Done With Nerve Conduction, Amplitude And Serial Electromyography, Non-Extremity (Cranial Nerve Suppled Or Axia) Muscle(S) Done With Interpretation And Report Serial Electromyography, Non-Extremity (Cranial Nerve Serial Electromyography, Non-Extremity (Cranial Nerve Serial Electromyography, Non-Extremity) Proceedings (Serial Electromy	33073	Electrical climated in Conjunction with Chemical Conjunction (Electrical Conjunction)	ψ04.01
98875 (Schemic Limb Exercise Test With Serial Specimen(S) Acquisition For Muscle(S) Metabolite(S) Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And Sesses Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 869.5 Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And Sesses (Season) Complete, Five Or More Muscles Studied, Innervated By Three Or More Nerves Or For Orthor Spinal Levels (Season) Complete, Five Orthore Muscles Studied, Innervated By Three Orthore Nerves Or For Orthor Spinal Levels (Season) Complete, Five Orthore Muscles Studied, Innervated By Three Orthore Nerves Orthore	95874	Needle Electromyography For Guidance In Conjunction With Chemodenervation (List Separately In Addition To Code For Primary Procedure)	\$57.16
Needle Electromyography, Each Extremity, Wills Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And 95886 Latency/Velocity Study, Complete, Five Or More Muscles Studied, Innevated By Three Or More News Or Four Or More Spinal Levels (\$105,44 95886 Latency/Velocity Study, Complete, Five Or More Muscles Studied, Innevated By Three Or More News Or Four Or More Spinal Levels (\$105,44 95886 Latency/Velocity Study, Complete, Five Or More Muscles Studied, Innevated By Three Or More News Or Four Or More Spinal Levels (\$105,44 95887 Latency/Velocity Study, Complete, Five Or More Muscles Studied, Innevated By Three Or More News Or Four Or More Spinal Levels (\$105,44 95887 Latency/Velocity Study, Usia Spearately In Addition To Code Fire Primary Procedure) 95887 Latency/Velocity Study, Usia Spearately In Addition To Code Fire Primary Procedure) 95887 Latency/Velocity Study, Usia Spearately In Addition To Code Fire Primary Procedure) 95898 News Transmission Studies, 3-4 Studies 95908 News Transmission Studies, 3-4 Studies 95910 Nerve Transmission Studies, 7-8 Studies 95910 Nerve Transmission Studies, 7-8 Studies 95910 Nerve Transmission Studies, 7-8 Studies 95912 Nerve Transmission Studies, 1-1-12 Studies 95913 Poly Nerve Transmission Studies, 1-1-12 Studies 95914 Nerve Transmission Studies, 1-1-12 Studies 95915 Nerve Transmission Studies, 1-1-12 Studies 95916 Nerve Transmission Studies, 1-1-12 Studies 95917 Nerve Transmission Studies, 1-1-12 Studies 95918 Nerve Transmission Studies, 1-1-12 Studies 95919 Nerve Transmission Studies, 1-1-12 Studies 95910 Nerve Transmission Studies, 1-1-12 Studies 95910 Nerve Transmission Studies, 1-1-12 Studies 95910 Nerve Transmission Studies, 1-1-12 Studies 95911 Nerve Transmission Studies, 1-1-12 Studies 95911 N	95875	Ischemic Limb Exercise Test With Serial Specimen(S) Acquisition For Muscle(S) Metabolite(S)	\$132.47
Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And Se886 Latency/Velocity Study, Complete, Five Or More Muscles Studied, Innevated By Three Or More Nerves Of Four Or More Spinal Levels (\$105.44 Needle Electromyography, Non-Extremity (Cranial Nerve Supplied Or Asial) Muscle (\$) Done With Nerve Conduction, Amplitude And Septiment And Report Septiment And Recording Of Movement And Or Feeling Of Arm Or Leg With Interpretation And Report Septiment And Recording Of Movement And Or Feeling Of Arm Or Leg With Interpretation And Report Septiment Report Sept		Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And	
Sease Latency/Velocity Study; Complete, Five Or More Muscles Studied, Innervated By Three Or More Nerves Or Four Or More Spinal Levels	95885	Latency/Velocity Study; Limited (List Separately In Addition To Code For Primary Procedure)	\$69.53
Sease Latency/Velocity Study; Complete, Five Or More Muscles Studied, Innervated By Three Or More Nerves Or Four Or More Spinal Levels			
Needle Electromycarphy, Non-Extremity (Cranial Nerve Supplied Or Axial) Muscle(S) Done With Nerve Conduction, Amplitude And			
S881 Latency/Velocity Study (List Separately in Addition To Code For Primary Procedure) \$89.1	95886		\$105.48
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Septil Nerve Transmission Studies, 9-10 Studies \$229.9			\$190.94
Sept Nerve Transmission Studies, 13 Or More Studies \$309.4	95911	Nerve Transmission Studies, 9-10 Studies	\$229.94
Measurement Of Pupil With Healthcare Professional Interpretation And Report S\$3.6	95912	Nerve Transmission Studies, 11-12 Studies	\$267.62
Testing Of Autonomic For Heart Rate Response To Deep Breathing Testing Of Autonomic Nervous System Function; Vasomotor Adrenergic Innervation (Sympathetic Adrenergic Function), Including Beat-To-Beat 195922 Blood Pressure And R-R Interval Changes During Valsabya Maneuver And At Least Five Minutes Of Passive Tilt Testing Of Autonomic Nervous System Function; Sudomotor, Including One Or More Of The Following: Quantitative Sudomotor Axon Reflex Test (Qsart), Silastic Sweat Imprint, Thermoregulatory Sweat Test, And Changes In Sympathetic Skin Potential \$135.5 Testing Of Autonomic (Sympathetic) Nervous System Function, At Least 5 Minutes Of Tilt \$159.4 Testing Of Autonomic (Sympathetic) Nervous System Function, At Least 5 Minutes Of Tilt \$159.4 Testing Of Autonomic (Sympathetic) Nervous System Function, At Least 5 Minutes Of Tilt \$159.4 Testing Of Autonomic (Sympathetic) Nervous System Function, At Least 5 Minutes Of Tilt \$159.4 Testing Of Autonomic (Sympathetic) Nervous System; In Upper Limbs \$177.8 Testing Of Autonomic (Sympathetic) Nervous System; In Lower Limbs \$177.8 Testing Of Autonomic (Sympathetic) Nervous System; In Upper Limbs \$177.8 Testing Of Autonomic (Sympathetic) Nervous System; In Upper Limbs \$177.8 Testing Of Autonomic (Sympathetic) Nervous System; In Upper Limbs \$177.8 Testing Of Autonomic Nervous System; In Upper Limbs \$177.8 Testing Of Autonomic Nervous System; In Upper Limbs \$177.8 Testing Of Autonomic Nervous System; In Upper Limbs \$177.8 Testing Of Autonomic Nervous System; In Upper And Testing (Repetitive Stimulation); Upper Limbs \$177.8 Testing Of Autonomic Nervous System During Operation, Paired Stimuli), Each Nerve, Any One Method \$175.7 Testing Of Nervous System; In Upper And Lower Limbs \$177.8 Testing Of Autonomic Nervous System During Operation, Paired Stimulited Sites In The Arms And Legs (Brain Motor Standard Of Nervous System; In Upper And Lower Limbs Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor Standard			\$309.42
Testing Of Autonomic Nervous System Function; Vasomotor Adrenergic Innervation (Sympathetic Adrenergic Function), Including Beat-To-Beat Blood Pressure And R-R Interval Changes During Valsalva Maneuver And At Least Five Minutes Of Passive Tit \$97.11 Testing Of Autonomic Nervous System Function; Sudomotor, Including One Or More Of The Following: Quantitative Sudomotor Axon Reflex Testing Of Autonomic System Function; Sudomotor, Including One Or More Of The Following: Quantitative Sudomotor Axon Reflex Test (Qsart), Silastic Sweat Imprint, Thermoregulatory Sweat Test, And Changes In Sympathetic Skin Potential \$135.5 95924 Testing Of Autonomic (Sympathetic) Nervous System Function, At Least 5 Minutes Of Tilt \$159.4 95925 Nervous System; In Upper Limbs \$177.8 95926 Nervous System; In Lower Limbs \$154.0 95927 Nervous System; In The Trunk Or Head \$150.1 95928 Central Motor Evoked Potential Study (Transcranial Motor Stimulation); Upper Limbs \$228.4 95929 Central Motor Evoked Potential Study (Transcranial Motor Stimulation); Lower Limbs \$235.1 95930 Measurement And Recording Of Nerve Conduction Patterns Using Visually-Evoked Stimulation \$770.0 95933 Orbicularis Oculi (Blink) Reflex, By Electrodiagnostic Testing \$81.6 95937 Neuromuscular Junction Testing (Repetitive Stimulation, Paired Stimuli), Each Nerve, Any One Method \$75.77 95938 Nervous System; In Upper And Lower Limbs \$389.8 Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor \$9593) Stimulation Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor \$9593) Stimulation Phase (Eg., Thiopental Activation Test) Price By Report Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of Price By Report Pharmacological Or Physical Activation Test) System During Operation, For Epileptic Spike Analysis Oligial Analysis Of Electrical Brain Wave Activity			\$13.64
Sport Blood Pressure And R-R Interval Changes During Valsalva Maneuver And At Least Five Minutes Of Passive Tilt Testing Of Autonomic Nervous System Function; Sudomotor, Including One Or More Of The Following: Quantitative Sudomotor Axon Reflex Sport (Spart), Silastic Sweat Imprint, Thermoregulatory Sweat Test, And Changes In Sympathetic Skin Potential \$135.55 \$155.54 \$155.55 \$159.45 \$	95921		\$85.27
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Test (Ösart), Silastic Sweat Imprint, Thermoregulatory Sweat Test, And Changes In Sympathetic Skin Potential \$135.5 95924 Testing Of Autonomic (Sympathetic) Nervous System Function, At Least 5 Minutes Of Tilt \$159.4 95925 Nervous System; In Upper Limbs \$177.8 95927 Nervous System; In Lower Limbs \$150.1 95928 Central Motor Evoked Potential Study (Transcranial Motor Stimulation); Upper Limbs \$228.4 95929 Central Motor Evoked Potential Study (Transcranial Motor Stimulation); Upper Limbs \$228.4 95930 Measurement And Recording Of Nerve Conduction Patterns Using Visually-Evoked Stimulation \$9530 Measurement And Recording Of Nerve Conduction Patterns Using Visually-Evoked Stimulation \$9530 Noicularis Oculi (Blink) Reflex, By Electrodiagnostic Testing \$181.6 95937 Neuromuscular Junction Testing (Repetitive Stimulation, Paired Stimuli), Each Nerve, Any One Method \$75.7 \$100 Noit-Latency Somatosensory Evoked Potential Study, Stimulation Of Any/All Peripheral Nerves Or Skin Sites, Recording From The Central 95938 Nervous System; In Upper And Lower Limbs \$389.8 Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor 95939 Stimulation) \$338.8 95940 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes \$33.5 95941 Continuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of 95954 Activation Phase (Eg, Thiopental Activation Test) 95956 Wada Activation Test For Hemispheric Function, Including Electroencephalogram (Eeg) Using Electroencephalogram (Eeg) Using Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electroencephalographic (Eeg) Using Electroencephalographic (Eeg) Using Electroencephalogram Function, First	95922	i i	\$97.16
Testing Of Autonomic (Sympathetic) Nervous System Function, At Least 5 Minutes Of Tilt \$159.49	05022		¢125 57
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95930 Measurement And Recording Of Nerve Conduction Patterns Using Visually-Evoked Stimulation \$70.0 95933 Orbicularis Oculi (Blink) Reflex, By Electrodiagnostic Testing 95937 Neuromuscular Junction Testing (Repetitive Stimulation, Paired Stimuli), Each Nerve, Any One Method \$75.77 Short-Latency Somatosensory Evoked Potential Study, Stimulation Of Any/All Peripheral Nerves Or Skin Sites, Recording From The Central 95938 Nervous System; In Upper And Lower Limbs Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor \$388.3 95930 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes \$33.5 95941 Continuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of Activation Phase (Eg, Thiopental Activation Test) \$389.65 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) \$249.65 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First		7. 11	\$235.17
95937 Neuromuscular Junction Testing (Repetitive Stimulation, Paired Stimuli), Each Nerve, Any One Method Short-Latency Somatosensory Evoked Potential Study, Stimulation Of Any/All Peripheral Nerves Or Skin Sites, Recording From The Central 95938 Nervous System; In Upper And Lower Limbs Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor 95939 Stimulation) 95940 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes 95941 Continuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of 95954 Activation Phase (Eg, Thiopental Activation Test) 95955 Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First	95930	Measurement And Recording Of Nerve Conduction Patterns Using Visually-Evoked Stimulation	\$70.01
Short-Latency Somatosensory Evoked Potential Study, Stimulation Of Any/All Peripheral Nerves Or Skin Sites, Recording From The Central 95938 Nervous System; In Upper And Lower Limbs \$389.8 Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor 95939 Stimulation) \$588.3 95940 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes \$33.5 95941 Continuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of 95954 Activation Phase (Eg, Thiopental Activation Test) 95955 Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First			\$81.67
95938 Nervous System; In Upper And Lower Limbs Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor 95939 Stimulation) 95940 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes 95941 Continuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of 95954 Activation Phase (Eg, Thiopental Activation Test) 95955 Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First	95937		\$75.72
Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor \$588.3 Stimulation) \$588.3 Stimulation) \$588.3 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes \$33.5 Ontinuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of \$389.6 Activation Phase (Eg, Thiopental Activation Test) \$389.6 Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) \$389.6 Signature (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) \$249.6 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring \$605.3 Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First			*
95939 Stimulation) 95940 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes 95941 Continuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of 95954 Activation Phase (Eg, Thiopental Activation Test) 95955 Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First	95938		\$389.81
95940 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes \$33.5 95941 Continuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of Activation Phase (Eg, Thiopental Activation Test) 95955 Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First	05000		¢ 500.07
95941 Continuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of 95954 Activation Phase (Eg, Thiopental Activation Test) 95955 Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First		'	
Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of 4 Activation Phase (Eg, Thiopental Activation Test) Sass.6		, , , , , ,	
95954Activation Phase (Eg, Thiopental Activation Test)\$389.6095955Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery)\$174.3095957Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis)\$249.6095958Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring\$605.30Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First	000-1		Thoo by Report
95955 Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First	95954		\$389.69
95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First			\$174.39
95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First			\$249.69
			\$605.34
95961 Hour \$308.3			
	95961	Hour	\$308.31

95962 Provoke Seizures Or Identif 95965 Magnetoencephalography (95966 Measurement And Recordir 95967 Measurement And Recordir 95970 Electronic Analysis Of Impla 95971 Programming Electronic Analysis Of Impla 95972 Programming 95976 Electronic Analysis Of Impla 95977 Electronic Analysis Of Impla 95976 Electronic Analysis Of Impla 95980 Form, Battery Status, Electr Electronic Analysis Of Impla 95981 Form, Battery Status, Electr Electronic Analysis Of Impla 95982 Form, Battery Status, Electr Electronic Analysis Of Impla 95983 To-Face Time With Qualifier Electronic Analysis Of Impla 95984 Face-To-Face Time With Q Refilling And Maintenance O 95990 Includes Electronic Analysis Refilling And Maintenance O 95991 Includes Electronic Analysis 95992 Repositioning Maneuvers F 95999 Unlisted Neurological Or Ne 96000 Three-Dimensional, Video-T 96001 Three-Dimensional, Video-T 96001 Three-Dimensional, Video-T 96002 Dynamic Surface Electronic Review And Interpretation E 96004 Dynamic Fine Wire Electronic Review And Interpretation E 96004 Dynamic Fine Wire Electronic 96005 Dynamic Fine Wire Electronic P6006 Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Test Admini 96111 Developmental Test Admini 96112 Developmental Test Admini 96113 Developmental Test Admini 96110 Psychological Testing Evalu 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu	ubcortical Mapping By Stimulation And/Or Recording Of Electrodes On Brain Surface, Or Of Depth Electrodes, To tify Vital Brain Structures; Each Additional Hour Of Attendance By A Physician Or Other Qualified	
95966 Measurement And Recordir 95967 Measurement And Recordir 95970 Electronic Analysis Of Implated Electronic Analysis Of Implated Programming Electronic Analysis Of Implated Programming 95971 Electronic Analysis Of Implated Programming 95972 Electronic Analysis Of Implated Programming 95976 Electronic Analysis Of Implated Electronic Analysis Of I		\$252.91
95967 Measurement And Recordir 95970 Electronic Analysis Of Implate Electronic Analysis Of Implate Programming 95971 Programming 95972 Programming 95976 Electronic Analysis Of Implate Programming 95977 Electronic Analysis Of Implate Programming 95977 Electronic Analysis Of Implate Programming 95978 Electronic Analysis Of Implate Programming 95980 Form, Battery Status, Electronic Analysis Of Implate Program, Battery Sta	(Meg), Recording And Analysis; For Spontaneous Brain Magnetic Activity (Eg, Epileptic Cerebral Cortex Localization)	\$426.17
95970 Electronic Analysis Of Implate Electronic Analysis Of Implate Programming Electronic Analysis Of Implate Programming 95972 Programming 95976 Electronic Analysis Of Implate Programming 95977 Electronic Analysis Of Implate Programming 95980 Form, Battery Status, Electronic Analysis Of Implate Program, Battery Status, Electronic Analysis Of Implatery Includes Electronic Analysis Of Implat	ling Of Externally Evoked Brain Processing Function Using Magnetic Fields, Single Method	\$216.05
Electronic Analysis Of Impla 95971 Programming Electronic Analysis Of Impla 95972 Programming 95976 Electronic Analysis Of Impla 95977 Electronic Analysis Of Impla 95980 Form, Battery Status, Electr Electronic Analysis Of Impla 95981 Form, Battery Status, Electr Electronic Analysis Of Impla 95982 Form, Battery Status, Electr Electronic Analysis Of Impla 95983 To-Face Time With Qualifier Electronic Analysis Of Impla 95984 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95985 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95986 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95987 Refilling And Maintenance Of Includes Electronic Analysis 95990 Includes Electronic Analysis 95991 Willisted Neurological Or Neuropa 96000 Three-Dimensional, Video-To-Pace Time With Electronic Analysis 96000 Three-Dimensional, Video-To-Pace Time Wire Electronic Analysis 96000 Three-Dimensional, Video-To-Pace Time Wire Electronic Analysis 96000 Dynamic Surface Electronic Pace Time Wire Electronic Analysis 96000 Dynamic Plantar Pressure Nouropamic Plantar Pla	ling Of Externally Evoked Brain Processing Function Using Magnetic Fields, Each Additional Method	\$188.90
95971 Programming Electronic Analysis Of Implated Programming 95976 Electronic Analysis Of Implated Programming 95976 Electronic Analysis Of Implated Programming 95976 Electronic Analysis Of Implated Programming 95980 Form, Battery Status, Electronic Analysis Of Implated Programming 95980 Form, Battery Status, Electronic Analysis Of Implated Programming 95981 Form, Battery Status, Electronic Analysis Of Implated Programming 95982 Form, Battery Status, Electronic Analysis Of Implated Programming 95983 To-Face Time With Qualified Electronic Analysis Of Implated Programming 95984 Face-To-Face Time With Qualified Electronic Analysis Of Implated Programming 95989 Includes Electronic Analysis Of Implated Programming Manaeuvers F. 95999 Unlisted Neurological Or Neuropsympson Office of Includes Electronic Analysis Of Implated Neurological Testing Selection Office of Includes Electronic Analysis Office of Includes Elect	lanted Brain, Spinal Cord Or Peripheral Stimulation Device	\$19.40
Electronic Analysis Of Impla 95976 Electronic Analysis Of Impla 95976 Electronic Analysis Of Impla 95977 Electronic Analysis Of Impla 95980 Form, Battery Status, Electr Electronic Analysis Of Impla 95981 Form, Battery Status, Electr Electronic Analysis Of Impla 95982 Form, Battery Status, Electr Electronic Analysis Of Impla 95983 To-Face Time With Qualifier Electronic Analysis Of Impla 95984 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95980 Includes Electronic Analysis Refilling And Maintenance Of Includes Electronic Analysis 95990 Includes Electronic Analysis 95991 Repositioning Maneuvers F 95990 Unlisted Neurological Or Ne 96000 Three-Dimensional, Video-1 96001 Three-Dimensional, Video-1 96002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electron Review And Interpretation E 96004 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (Im- 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96114 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96131 Psychological Testing Evalu 96131 Psychological Testing Evalu 96131 Psychological Testing Evalu 96133 Neuropsychological Testing 96136 Psychological Or Neuropsych 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra Intravenous Infusion, Hydra 100 Infusion Into A Vein For The	lanted Brain, Spinal Cord Or Peripheral Stimulation Device With Simple Spinal Cord Or Peripheral Nerve Stimulator	·
95976 Electronic Analysis Of Implated Programming 95977 Electronic Analysis Of Implated Programming 95977 Electronic Analysis Of Implated Programming 95980 Form, Battery Status, Electronic Analysis Of Implated Programming 95981 Form, Battery Status, Electronic Analysis Of Implated Programming 95982 Form, Battery Status, Electronic Analysis Of Implated Programming 95983 To-Face Time With Qualifier Electronic Analysis Of Implated Programming 95984 Face-To-Face Time With Qualifier Electronic Analysis Of Implated Programming 95990 Includes Electronic Analysis 95991 Refilling And Maintenance Of Includes Electronic Analysis 95992 Repositioning Maneuvers From Programming 95999 Unlisted Neurological Or Neuropsymanic Plantar Pressure Maler Programming 96000 Three-Dimensional, Video-196002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electromy 96004 Dynamic Plantar Pressure Maler Programming 96005 Review And Interpretation Electronic Programming 96006 Production Ability, From Programming 96110 Developmental Test Adminitive Programming 961110 Developmental Test Adminitive Programming 96112 Developmental Test Adminitive Programming 96113 Developmental Test Adminitive Programming 96114 Neurobehavioral Status Examing 96130 Psychological Testing Evaluation Programming 96131 Psychological Testing Evaluation Programming 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96134 Psychological Or Neuropsyched 96165 Infusion Into A Vein For The 96365 Infusion Into A Vein For The		\$50.43
95977 Electronic Analysis Of Impla Electronic Analysis Of Impla 95980 Form, Battery Status, Electr Electronic Analysis Of Impla 95981 Form, Battery Status, Electr Electronic Analysis Of Impla 95982 Form, Battery Status, Electr Electronic Analysis Of Impla 95983 To-Face Time With Qualifier Electronic Analysis Of Impla 95984 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95985 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95986 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95990 Includes Electronic Analysis 95990 Includes Electronic Analysis 95991 Unlisted Neurological Or Ne 96000 Three-Dimensional, Video-T 96000 Three-Dimensional, Video-T 96000 Dynamic Surface Electromy 96000 Dynamic Fine Wire Electron Neurofunctional Testing Sel 96020 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96114 Neurobehavioral Status Exa 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96134 Psychological Or Neuropsych 96160 Administration And Interpret 96361 Infusion Into A Vein For The 96365 Infusion Into A Vein For The	lanted Brain, Spinal Cord Or Peripheral Stimulation Device With Complex Spinal Cord Or Peripheral Nerve Stimulator	\$57.82
Electronic Analysis Of Impla 95980 Form, Battery Status, Electronic Analysis Of Impla 95981 Form, Battery Status, Electronic Analysis Of Impla 95981 Form, Battery Status, Electronic Analysis Of Impla 95982 Form, Battery Status, Electronic Analysis Of Impla 95983 To-Face Time With Qualifier Electronic Analysis Of Impla 95984 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95984 Face-To-Face Time With Qualifier Refilling And Maintenance Of Includes Electronic Analysis 95990 Includes Electronic Analysis 95991 Repositioning Maneuvers F. 95999 Unlisted Neurological Or Neurological Three-Dimensional, Video-196001 Three-Dimensional, Video-196002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electronic Review And Interpretation Electronic Physician Or Other Qualifier Surface Electronic Physician Or Other Qualifier Physician Or Other	lanted Brain, Spinal Cord Or Peripheral Stimulation Device With Simple Cranial Nerve Stimulator Programming	\$41.34
Electronic Analysis Of Impla 95981 Form, Battery Status, Electr Electronic Analysis Of Impla 95982 Form, Battery Status, Electr Electronic Analysis Of Impla 95983 To-Face Time With Qualifier Electronic Analysis Of Impla 95984 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95985 Face-To-Face Time With Qualifier Refilling And Maintenance Of Includes Electronic Analysis 95990 Includes Electronic Analysis 95991 Includes Electronic Analysis 95992 Repositioning Maneuvers F 95999 Unlisted Neurological Or Ne 96000 Three-Dimensional, Video-T 96001 Three-Dimensional, Video-T 96002 Dynamic Surface Electronic Review And Interpretation E 96004 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96116 Neurobehavioral Status Exe 96121 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsych 96160 Administration And Interpret 96361 Infusion Into A Vein For The	lanted Brain, Spinal Cord Or Peripheral Stimulation Device With Complex Cranial Nerve Stimulator Programming	\$54.67
Electronic Analysis Of Impla Form, Battery Status, Electronic Analysis Of Impla 95981 Form, Battery Status, Electronic Analysis Of Impla 95982 Form, Battery Status, Electronic Analysis Of Impla 95983 To-Face Time With Qualifier Electronic Analysis Of Impla Face-To-Face Time With Qualifier Electronic Analysis Of Impla Posses of Includes Electronic Analysis Refilling And Maintenance Of Includes Electronic Analysis 95991 Includes Electronic Analysis 95992 Repositioning Maneuvers Fosses Unlisted Neurological Or Neurological Or Neurological Or Neurological Or Neurological Or Neurological Or Neurological Dynamic Surface Electromy 96000 Three-Dimensional, Video-196001 Three-Dimensional, Video-196002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electronic Review And Interpretation Electronic Posses Production Ability, Fosses Posses Production Ability, Fosses Production Posses Production Posses Production Posses Production Posses Posses Production Ability, Fosses Posses Production Ability, Fosses Production Posses Production Posses Production Posses Production Posses Production Posses Production Posses Posses Production Posses Posses Production Posses Posses Production Poss	lanted Neurostimulator Pulse Generator System (Eg, Rate, Pulse Amplitude And Duration, Configuration Of Wave trode Selectability, Output Modulation, Cycling, Impedance And Patient Measurements) Gastric Neuros	\$39.76
95982 Form, Battery Status, Electronic Electronic Analysis Of Impla 95983 To-Face Time With Qualifier Electronic Analysis Of Impla Face-To-Face Time With Qualifier Electronic Analysis Of Impla Face-To-Face Time With Qualifier Electronic Analysis of Impla Face-To-Face Time With Qualifier Electronic Analysis Refilling And Maintenance Of Includes Electronic Analysis 95991 Includes Electronic Analysis 95992 Includes Electronic Analysis 95999 Unlisted Neurological Or Neurological Three-Dimensional, Video-To-96001 Three-Dimensional, Video-To-96002 Dynamic Surface Electronic Polynamic Fine Wire Electronic Review And Interpretation Electronic Polynamic Plantar Pressure Neurofunctional Testing Sel 96020 By A Physician Or Other Qualification Polynamic Plantar Pressure Neurofunctional Testing Sel 96100 Developmental Screening 96112 Developmental Test Adminic 96113 Developmental Test Adminic 96113 Developmental Test Adminic 96114 Neurobehavioral Status Examination Polynamic Plantar Pressure Neuropsychological Testing 96130 Psychological Testing Evaluation Psychological Testing Psychological Testing Psychological Testing Psychological Or Neuropsychological Psychological Testing Psychological Or Neuropsychological Intervenous Infusion, Hydra Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	lanted Neurostimulator Pulse Generator System (Eg, Rate, Pulse Amplitude And Duration, Configuration Of Wave strode Selectability, Output Modulation, Cycling, Impedance And Patient Measurements) Gastric Neuros	\$35.89
Electronic Analysis Of Impla 95983 To-Face Time With Qualifie Electronic Analysis Of Impla 95984 Face-To-Face Time With Qualifie Refilling And Maintenance Of Includes Electronic Analysis Refilling And Maintenance Of Includes Electronic Analysis 95990 Includes Electronic Analysis Refilling And Maintenance Of Includes Electronic Analysis 95992 Repositioning Maneuvers F. 95999 Unlisted Neurological Or Ne 96000 Three-Dimensional, Video-T. 96001 Three-Dimensional, Video-T. 96002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electronic Review And Interpretation E. 96004 Dynamic Plantar Pressure N. Neurofunctional Testing Sel 96020 By A Physician Or Other Qu. Assessment Of Aphasia (In. 96105 Speech Production Ability, F. 96110 Developmental Screening 96112 Developmental Test Admini 96114 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsych 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 1000 Intravenous Infusion, Hydra	lanted Neurostimulator Pulse Generator System (Eg, Rate, Pulse Amplitude And Duration, Configuration Of Wave trode Selectability, Output Modulation, Cycling, Impedance And Patient Measurements) Gastric Neuros	\$54.22
Electronic Analysis Of Impla 95984 Face-To-Face Time With Q Refilling And Maintenance O 95990 Includes Electronic Analysis Refilling And Maintenance O 95991 Includes Electronic Analysis 95992 Repositioning Maneuvers F 95999 Unlisted Neurological Or Ne 96000 Three-Dimensional, Video-T 96001 Three-Dimensional, Video-T 96002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electrom Review And Interpretation E 96004 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96116 Neurobehavioral Status Exe 96121 Neurobehavioral Status Exe 96121 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96361 Infusion Into A Vein For The	lanted Brain, Spinal Cord Or Peripheral Stimulation Device With Brain Stimulator Programming, First 15 Minutes Face-	7-11-
Refilling And Maintenance Concludes Electronic Analysis Refilling And Maintenance Concludes Electronic Analysis Refilling And Maintenance Concludes Electronic Analysis Psy91 Includes Electronic Analysis Sy92 Repositioning Maneuvers For Sy99 Unlisted Neurological Or Neurological Or Neurological Three-Dimensional, Video-Ty96000 Three-Dimensional, Video-Ty96001 Three-Dimensional, Video-Ty96002 Dynamic Surface Electronic Review And Interpretation Electronic Py06003 Dynamic Fine Wire Electronic Review And Interpretation Electronic Py06004 Dynamic Plantar Pressure Neurofunctional Testing Sel By A Physician Or Other Quassessment Of Aphasia (In 96105 Speech Production Ability, Fy06110 Developmental Screening Poetics Developmental Test Adminic Poetics Standardized Thought Proceeding Psychological Testing Evaluation Psychological Testing Evaluation Psychological Testing Psychological Testing Psychological Testing Psychological Or Neuropsychological Testing Psychological Or Neuropsychological Testing Psychological Or Neuropsychological Intervenous Infusion, Hydra Intravenous Infusion, Hydra Intravenous Infusion, Hydra Intravenous Infusion, Hydra Intravenous Infusion, Hydra Infusion Into A Vein For The	ed Health Care Professional lanted Brain, Spinal Cord Or Peripheral Stimulation Device With Brain Stimulator Programming, Additional 15 Minutes	\$52.13
Refilling And Maintenance On Includes Electronic Analysis Sp5992 Repositioning Maneuvers F Sp599 Unlisted Neurological Or Other	Qualified Health Care Professional Of Implantable Pump Or Reservoir For Drug Delivery, Spinal (Intrathecal, Epidural) Or Brain (Intraventricular),	\$37.79
95991 Includes Electronic Analysis 95992 Repositioning Maneuvers F 95999 Unlisted Neurological Or Ne 96000 Three-Dimensional, Video-T 96001 Three-Dimensional, Video-T 96002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electrom Review And Interpretation E 96004 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Exe 96121 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96361 Infusion Into A Vein For The	is Of Pump, When Performed;	\$87.12
95999 Unlisted Neurological Or Ne 96000 Three-Dimensional, Video-1 96001 Three-Dimensional, Video-1 96002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electrom Review And Interpretation E 96004 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96114 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96160 Administration And Interpret 96361 Infusion Into A Vein For The	Of Implantable Pump Or Reservoir For Drug Delivery, Spinal (Intrathecal, Epidural) Or Brain (Intraventricular), is Of Pump, When Performed; Requiring Skill Of A Physician Or Other Qualified Health Care Profes	\$104.69
96000 Three-Dimensional, Video-1 96001 Three-Dimensional, Video-1 96002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electrom Review And Interpretation E 96004 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Ex 96121 Neurobehavioral Status Ex 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96361 Infusion Into A Vein For The		\$45.56
96001 Three-Dimensional, Video-T 96002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electromy Review And Interpretation E 96004 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Exa 96121 Neurobehavioral Status Exa 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	ū	Price By Report
96002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electromy 96003 Dynamic Fine Wire Electromy Review And Interpretation E 96004 Dynamic Plantar Pressure B Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In- 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Exe 96121 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96361 Infusion Into A Vein For The		\$80.17
96003 Dynamic Fine Wire Electron Review And Interpretation E 96004 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In- 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96131 Psychological Testing Evalu 96131 Neuropsychological Testing 96136 Psychological Or Neuropsych 96137 Psychological Or Neuropsych 96160 Administration And Interpret 96361 Infusion Into A Vein For The	-Taped, Computer-Based Gait Analysis During Walking	\$103.64
Review And Interpretation E 96004 Dynamic Plantar Pressure M Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Developmental Screening 96110 Developmental Screening 96111 Developmental Test Admini 96113 Developmental Test Admini 96114 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96131 Neuropsychological Testing 96132 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	nyography, During Walking Or Other Functional Activities, 1-12 Muscles	\$20.08
96004 Dynamic Plantar Pressure Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Exa 96121 Neurobehavioral Status Exa 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	omyography, During Walking Or Other Functional Activities, 1 Muscle	\$15.81
96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Exa 96121 Neurobehavioral Status Exa 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96140 Administration And Interpret 96161 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	By Physician Or Other Qualified Health Care Professional Of Comprehensive Computer-Based Motion Analysis, Measurements, Dynamic Surface Electromyography During Walking Or Other Functional Activities, And D	\$113.46
96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Exe 96121 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96136 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	election And Administration During Noninvasive Imaging Functional Brain Mapping, With Test Administered Entirely Qualified Health Care Professional (Ie, Psychologist), With Review Of Test Results And Report	\$172.40
96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Exa 96121 Neurobehavioral Status Exa 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsych 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra 196365 Infusion Into A Vein For The	ncludes Assessment Of Expressive And Receptive Speech And Language Function, Language Comprehension, Reading, Spelling, Writing, Eg, By Boston Diagnostic Aphasia Examination) With Interpretation And Report, P	\$92.38
96113 Developmental Test Admini 96116 Neurobehavioral Status Exa 96121 Neurobehavioral Status Exa 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The		\$13.63
96113 Developmental Test Admini 96116 Neurobehavioral Status Exa 96121 Neurobehavioral Status Exa 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	nistration By Qualified Health Care Professional With Interpretation And Report, First 60 Minutes	\$146.58
96116 Neurobehavioral Status Exa 96121 Neurobehavioral Status Exa 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	nistration By Qualified Health Care Professional With Interpretation And Report, Additional 30 Minutes	\$65.46
96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsych 96137 Psychological Or Neuropsych 96160 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	xamination By Qualified Health Care Professional With Interpretation And Report, First 60 Minutes	\$112.22
96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu. 96131 Psychological Testing Evalu. 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	xamination By Qualified Health Care Professional With Interpretation And Report, Additional 60 Minutes	\$88.80
96130 Psychological Testing Evalu- 96131 Psychological Testing Evalu- 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	cessing Testing, Interpretation, And Report Per Hour	\$105.93
96131 Psychological Testing Evalu- 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The		\$6.24
96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	luation By Qualified Health Care Professional, First 60 Minutes	\$112.22
96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	luation By Qualified Health Care Professional, Additional 60 Minutes	\$112.22
96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	g Evaluation By Qualified Health Care Professional, First 60 Minutes	\$112.22
96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	g Evaluation By Qualified Health Care Professional, Additional 60 Minutes	\$112.22
96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	ychological Test Administration And Scoring By Qualified Health Care Professional, First 30 Minutes	\$56.12
96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	ychological Test Administration And Scoring By Qualified Health Care Professional, Additional 30 Minutes etation Of Patient-Focused Health Risk Assessment	\$56.12 \$2.66
96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	etation Of Caregiver-Focused Health Risk Assessment	\$11.71
Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The	ů .	\$36.23
96365 Infusion Into A Vein For The	ration; Each Additional Hour (List Separately In Addition To Code For Primary Procedure)	\$13.57
96366 Infusion Into A Vein For The	nerapy, Prevention, Or Diagnosis Up To 1 Hour	\$72.00
	erapy, Prevention, Or Diagnosis	\$22.59
	Hour (List Separately In Addition To Code For Primary Procedure)	\$31.87
	nerapy, Prevention, Or Diagnosis, Concurrent With Another Infusion	\$20.97
	or Therapy Or Prophylaxis (Specify Substance Or Drug); Initial, Up To 1 Hour, Including Pump Set-Up And	Ф420 <u>20</u>
96369 Establishment Of Subcutan	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$139.22
	nerapy Or Prevention, Beneath The Skin	\$14.51
96371 Infusion For Therapy Or Pre	· · · · · · · · · · · · · · · · · · ·	\$56.57
96372 Injection Beneath The Skin		\$11.14
	177	\$17.13
96374 Injection Of Drug Or Substa 96375 Injection Of Different Drug O	nerapy, Diagnosis, Or Prevention	\$41.67

96376	Description	Foo
	Description Injection Of Drug Or Substance Into A Vein For Therapy, Diagnosis, Or Prevention, In A Facility	Fee Price By Report
- 20.3//	Application Of On-Body Injector For Injection Under Skin	\$20.01
	Injection Or Infusion Into A Vein Or Artery For Therapy, Prevention, Or Diagnosis	Price By Report
	Administration of respiratory syncytial virus, monoclonal antibody, seasonal dose by intramuscular injection, with counseling by physician or	, , , ,
96380	other qualified health care professional	\$19.85
	Administration of respiratory syncytial virus, monoclonal antibody, seasonal dose by intramuscular injection	\$17.21
	Chemotherapy Administration, Subcutaneous Or Intramuscular; Non-Hormonal Anti-Neoplastic	\$72.39
	Chemotherapy Administration, Subcutaneous Or Intramuscular; Hormonal Anti-Neoplastic	\$35.13
	Chemotherapy Into A Lesion, Up To And Including 7 Lesions	\$59.57
	Chemotherapy Into A Lesion, More Than 7 Lesions Chemotherapy Administration Introduced Publications Single Or Initial Substance/Drug	\$94.11
96409	Chemotherapy Administration; Intravenous, Push Technique, Single Or Initial Substance/Drug Chemotherapy Administration; Intravenous, Push Technique, Each Additional Substance/ Drug (List Separately In Addition To Code For	\$111.47
96411	Primary Procedure)	\$60.83
	Chemotherapy Administration, Intravenous Infusion Technique; Up To 1 Hour, Single Or Initial Substance/Drug	\$145.03
00110	Chemotherapy Administration, Intravenous Infusion Technique; Each Additional Hour, 1 To 8 Hours (List Separately In Addition To Code For	ψ110.00
96415	Primary Procedure)	\$30.78
	Chemotherapy Administration, Intravenous Infusion Technique; Initiation Of Prolonged Chemotherapy Infusion (More Than 8 Hours), Requiring	
96416	Use Of A Portable Or Implantable Pump	\$142.36
	Chemotherapy Administration, Intravenous Infusion Technique; Each Additional Sequential Infusion (Different Substance/ Drug), Up To 1 Hour	
	(List Separately In Addition To Code For Primary Procedure)	\$70.63
	Chemotherapy Administration, Intra-Arterial Push Technique	\$102.94
96422	Chemotherapy Administration, Intra-Arterial; Infusion Technique, Up To One Hour	\$157.12
00.405	Chemotherapy Administration, Intra-Arterial; Infusion Technique, Each Additional Hour Up To 8 Hours (List Separately In Addition To Code For	^-
	Primary Procedure) Prolonged Chemotherapy Infusion Into Artery By Portable Or Implanted Pump, More Than 8 Hours	\$72.51
	Administration Of Chemotherapy Into Chest Cavity	\$169.02 \$758.43
	Administration Of Chemotherapy Into Criest Cavity Administration Of Chemotherapy Into Abdominal Cavity	\$758.43 \$188.13
	Chemotherapy Administration, Into Cns (Eg, Intrathecal), Requiring And Including Spinal Puncture	\$179.56
	Refilling And Maintenance Of Portable Pump	\$179.30
	Refilling And Maintenance Of Implantable Pump Or Reservoir For Drug Delivery, Systemic (Eg, Intravenous, Intra-Arterial)	\$116.47
	Irrigation Of Implanted Venous Access Device For Drug Delivery Systems	\$26.32
	Chemotherapy Injection, Subarachnoid Or Intraventricular Via Subcutaneous Reservoir, Single Or Multiple Agents	\$127.03
96547	Intraoperative Heated Intraperitoneal Chemotherapy, First 60 Minutes	Price By Report
96548	Intraoperative Heated Intraperitoneal Chemotherapy, Each Additional 30 Minutes	Price By Report
96549	Unlisted Chemotherapy Procedure	\$31.14
96567	Application Of Light And Light-Sensitive Drugs To Aid Destruction Of Premalignant Skin Growths, Per Session	\$128.21
	Photodynamic Therapy By Endoscopic Application Of Light To Ablate Abnormal Tissue Via Activation Of Photosensitive Drug(S); First 30	
96570	Minutes (List Separately In Addition To Code For Endoscopy Or Bronchoscopy Procedures Of Lung And Gastrointestinal Tract)	\$47.46
	Photodynamic Therapy By Endoscopic Application Of Light To Ablate Abnormal Tissue Via Activation Of Photosensitive Drug(S); Each	
96571	Additional 15 Minutes (List Separately In Addition To Code For Endoscopy Or Bronchoscopy Procedures Of Lung And Gastrointestinal	\$23.68
96573	Application Of Light And Light-Sensitive Drugs To Aid Destruction Of Premalignant Skin Growths, Per Day	\$227.51
96574	Application Of Light And Light-Sensitive Drugs Following Removal Of Premalignant Thickened Skin Growth, Per Day	\$263.19
96900	Actinotherapy (Ultraviolet Light)	\$16.86
	Microscopic Examination Of Hairs Plucked Or Clipped By The Examiner (Excluding Hair Collected By The Patient) To Determine Telogen And	
96902	Anagen Counts, Or Structural Hair Shaft Abnormality	\$0.01
00004	Whole Body Integumentary Photography, For Monitoring Of High Risk Patients With Dysplastic Nevus Syndrome Or A History Of Dysplastic	
	Nevi, Or Patients With A Personal Or Familial History Of Melonoma Photochemotherapy Tar And Ultraviolet B (Goeckerman Treatment) Or Petrolatum And Ultraviolet B	¢co.40
90910	Filotochemotherapy far And Ottraviolet B (Gueckenhan freathlent) Of Fetiolatum And Ottraviolet B	\$69.12
		\$83.62
96912	Photochemotherapy Psoralens And Ultraviolet A (Puva)	
96912		\$83.62 \$97.89
96912 96913	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care	\$83.62
96912 96913 96920	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings)	\$83.62 \$97.89 \$146.74
96912 96913 96920 96921	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm	\$83.62 \$97.89 \$146.74 \$177.42
96912 96913 96920 96921 96922	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm	\$83.62 \$97.89 \$146.74 \$177.42 \$188.60
96912 96913 96920 96921 96922 96931 96932	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion	\$83.62 \$97.89 \$146.74 \$177.42 \$188.60 \$225.04
96912 96913 96920 96921 96931 96932 96933	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 520.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion	\$83.62 \$97.89 \$146.74 \$177.42 \$188.60 \$225.04 \$166.05 \$124.71 \$41.34
96912 96913 96920 96921 96922 96931 96932 96933	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report	\$83.62 \$97.89 \$146.74 \$177.42 \$188.60 \$225.04 \$166.05 \$124.71 \$41.34
96912 96913 96920 96921 96922 96931 96932 96933 96934	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report	\$83.62 \$97.89 \$146.74 \$177.42 \$188.60 \$225.04 \$166.05 \$124.71 \$41.34 \$115.56
96912 96913 96920 96921 96922 96931 96932 96933 96934 96935 96936	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin Interpretation And Report Of Microscopy Of Lesion Of Skin	\$83.62 \$97.89 \$146.74 \$177.42 \$188.60 \$225.04 \$166.05 \$124.71 \$41.34 \$115.56 \$75.87
96912 96913 96920 96921 96922 96931 96932 96933 96934 96935 96936	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin Unlisted Special Dermatological Service Or Procedure	\$83.62 \$97.89 \$146.74 \$177.42 \$188.60 \$225.04 \$166.05 \$124.71 \$41.34 \$115.56 \$75.87 \$39.70 Price By Report
96912 96913 96920 96921 96922 96931 96932 96933 96934 96935 96936 96999 97012	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin Unlisted Special Dermatological Service Or Procedure Physical Medicine Treatment To One Area Traction, Mechanical	\$83.62 \$97.89 \$146.74 \$177.42 \$188.60 \$225.04 \$166.05 \$124.71 \$41.34 \$115.56 \$75.87 \$39.70 Price By Report
96912 96913 96920 96921 96922 96931 96932 96933 96934 96936 96999 97012	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin Unlisted Special Dermatological Service Or Procedure Physical Medicine Treatment To One Area Traction, Mechanical Application Of Electrical Stimulation To 1 Or More Areas, Unattended By Physical Therapist	\$83.62 \$97.89 \$146.74 \$177.42 \$188.60 \$225.04 \$166.05 \$124.71 \$41.34 \$115.56 \$75.87 \$39.70 Price By Report
96912 96913 96920 96921 96922 96931 96932 96933 96935 96936 96999 97012 97014 97016	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Of Microscopy Of Lesion Of Skin Unlisted Special Dermatological Service Or Procedure Physical Medicine Treatment To One Area Traction, Mechanical Application Of Electrical Stimulation To 1 Or More Areas, Unattended By Physical Therapist Physical Medicine Treatment To One Area; Vasopneumatic Devices	\$83.62 \$97.89 \$146.74 \$177.42 \$18.60 \$225.04 \$166.05 \$1124.71 \$41.34 \$115.56 \$75.87 \$39.70 Price By Report \$10.86 \$9.96
96912 96913 96920 96921 96932 96933 96934 96935 96936 96999 97012 97014	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, Sco.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Microscopy Of Lesion Of Skin Unlisted Special Dermatological Service Or Procedure Physical Medicine Treatment To One Area Traction, Mechanical Application Of Electrical Stimulation To 1 Or More Areas, Unattended By Physical Therapist Physical Medicine Treatment To One Area; Vasopneumatic Devices Physical Medicine Treatment To One Area Paraffin Bath	\$83.62 \$97.89 \$146.74 \$177.42 \$188.60 \$225.04 \$166.05 \$124.71 \$41.34 \$115.56 \$75.87 \$39.70 Price By Report \$10.86 \$9.96 \$9.96
96912 96913 96920 96921 96932 96933 96934 96935 96936 96999 97012 97014 97016	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Les	\$83.62 \$97.89 \$146.74 \$177.42 \$188.60 \$225.04 \$166.05 \$124.71 \$41.34 \$115.56 \$75.87 \$39.70 Price By Report \$10.86 \$9.96 \$9.96
96912 96913 96920 96921 96932 96933 96934 96935 96936 96999 97012 97014 97016 97018	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Rep	\$83.62 \$97.89 \$146.74 \$177.42 \$188.60 \$225.04 \$166.05 \$124.71 \$41.34 \$115.56 \$75.87 \$39.70 Price By Report \$10.86 \$9.96 \$9.96 \$13.13
96912 96913 96920 96921 96922 96931 96932 96933 96936 96936 97012 97014 97016 97018 97022 97024	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpre	\$83.62 \$97.89 \$146.74 \$177.42 \$188.60 \$225.04 \$166.05 \$124.71 \$41.34 \$115.56 \$75.87 \$39.70 Price By Report \$10.86 \$9.96 \$9.96 \$13.13 \$9.96
96912 96913 96920 96921 96922 96931 96932 96934 96936 96936 96936 97014 97016 97018 97022 97024 97026 97028	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Rep	\$83.62 \$97.89 \$146.74 \$177.42 \$188.60 \$225.04 \$166.05 \$124.71 \$41.34 \$115.56 \$75.87 \$39.70 Price By Report \$10.86 \$9.96 \$9.96 \$9.96 \$13.13 \$9.96 \$9.96
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96912 96913 96920 96921 96932 96931 96932 96933 96934 96935 96936 97014 97016 97018 97022 97024 97026 97023 97032	Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, Abore Than 500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin Unlisted Special Dermatological Service Or Procedure Physical Medicine Treatment To One Area Traction, Mechanical Application Of Electrical Stimulation To 1 Or More Areas, Unattended By Physical Therapist Physical Medicine Treatment To One Area Paraffin Bath Physical Medicine Treatment To One Area Paraffin Bath Physical Medicine Treatment To One Area Spiathermy (Eg, Microwave) Physical Medicine Treatment To One Area Infrared Physical Medicine Treatment To One Area Ultraviolet Application Of Electrical Stimulation With Therapist Present, Each 15 Minutes	\$83.62 \$97.89 \$146.74 \$177.42 \$188.60 \$225.04 \$166.05 \$124.71 \$41.34 \$115.56 \$75.87 \$39.70 Price By Report \$10.86 \$9.96 \$9.96 \$13.13 \$9.96 \$15.58 \$15.58
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Code	Description	Fee
97113	Water Pool Therapy With Therapeutic Exercises To 1 Or More Areas, Each 15 Minutes	\$27.76
97116	Walking Training To 1 Or More Areas, Each 15 Minutes	\$21.97
	Therapeutic Procedure, One Or More Areas, Each 15 Minutes; Unlisted Therapeutic Procedure (Specify)	\$31.76
	Manual (Physical) Therapy Techniques To 1 Or More Regions, Each 15 Minutes	\$20.19
	Therapeutic Procedure(S), Group (2 Or More Individuals)	\$14.91
	Evaluation Of Physical Therapy, Typically 20 Minutes	\$73.71
	Evaluation Of Physical Therapy, Typically 30 Minutes	\$73.71
	Evaluation Of Physical Therapy, Typically 45 Minutes	\$73.71
97164	Re-Evaluation Of Physical Therapy, Typically 20 Minutes	\$57.74
97165	Evaluation Of Occupational Therapy, Typically 30 Minutes	\$73.71
97166	Evaluation Of Occupational Therapy, Typically 45 Minutes	\$73.71
97167	Evaluation Of Occupational Therapy Established Plan Of Care, Typically 60 Minutes	\$73.71
97168	Re-Evaluation Of Occupational Therapy Established Plan Of Care, Typically 30 Minutes	\$54.53
	Therapeutic Activities To Improve Function, With One-On-One Contact Between Patient And Provider, Each 15 Minutes	\$28.53
	Sensory Technique To Enhance Processing And Adaptation To Environmental Demands, Each 15 Minutes	\$45.50
	Training For Self-Care Or Home Management, Each 15 Minutes	\$24.28
	Wheelchair Management, Each 15 Minutes	\$22.23
	Removal Of Tissue From Wound, 20.0 Sq Cm Or Less	\$71.57
	Removal Of Tissue From Wound, Each Additional 20.0 Sq Cm	\$47.40
	Removal Of Tissue From Wounds Per Session	\$43.35
97605	Therapy Procedure Using A Special Bandage And Vacuum Pump, Surface Area 50.0 Sq Cm Or Less	\$44.95
97606	Therapy Procedure Using A Special Bandage And Vacuum Pump, Surface Area More Than 50.0 Sq Cm	\$51.50
	Therapy Procedure Using A Special Bandage, Vacuum Pump And Disposable Medical Equipment, Surface Area 50.0 Sq Cm Or Less	\$273.83
97608	Therapy Procedure Using A Special Bandage, Vacuum Pump And Disposable Medical Equipment, Surface Area More Than 50.0 Sq Cm	\$270.07
	Low Frequency, Non-Contact, Non-Thermal Ultrasound Wound Assessment, And Instructions For Ongoing Care, Per Day	\$442.91
	Physical Performance Test Or Measurement With Report, Each 15 Minutes	
	Assistive Technology Assessment To Enhance Functional Performance, Each 15 Minutes	\$24.99 \$38.29
	Training In Use Of Orthotics (Supports, Braces, Or Splints) For Arms, Legs And/Or Trunk, Per 15 Minutes	\$36.35
	Management And/Or Training In Use Of Orthotics (Supports, Braces, Or Splints) For Arms, Legs, And/Or Trunk, Per 15 Minutes	\$39.88
	Unlisted Physical Medicine/Rehabilitation Service Or Procedure	\$37.39
97802	Medical Nutrition Therapy, Assessment And Intervention, Each 15 Minutes	\$37.46
97803	Medical Nutrition Therapy Re-Assessment And Intervention, Each 15 Minutes	\$32.49
97804	Medical Nutrition Therapy Performed In A Group Setting, Each 30 Minutes	\$17.21
98925	Osteopathic Manipulative Treatment (Omt); One To Two Body Regions Involved	\$27.14
	Osteopathic Manipulative Treatment (Omt); Three To Four Body Regions Involved	\$48.50
	Osteopathic Manipulative Treatment (Omt); Five To Six Body Regions Involved	\$48.50
	Osteopathic Manipulative Treatment (Omt); Seven To Eight Body Regions Involved	\$56.42
	Osteopathic Manipulative Treatment (Omt); Nine To Ten Body Regions Involved	\$61.33
	Telephone Assessment And Management Service, 5-10 Minutes Of Medical Discussion	\$16.71
	Telephone Assessment And Management Service, 11-20 Minutes Of Medical Discussion	\$30.84
98968	Telephone Assessment And Management Service, 21-30 Minutes Of Medical Discussion	\$45.42
	Supplies And Materials (Except Spectacles), Provided By The Physician Or Other Qualified Health Care Professional Over And Above Those	
99070	Usually Included With The Office Visit Or Other Services Rendered (List Drugs, Trays, Supplies, Or Materials Provided)	\$0.01
	Special Reports Such As Insurance Forms, More Than The Information Conveyed In The Usual Medical Communications Or Standard	
99080	Reporting Form	\$0.01
	Collection And Interpretation Of Physical Parameters Stored In Computers And/Or Transmitted By The Patient And/Or Caregiver To Qualified	
99091	Health Care Professional, Requiring 30 Minutes Or More, Per 30 Days	\$48.80
	Moderate Sedation Services By Physician Also Performing A Procedure, Patient Younger Than 5 Years Of Age, First 15 Minutes	\$73.90
	Moderate Sedation Services By Physician Also Performing A Procedure, Patient 5 Years Of Age Or Older, First 15 Minutes	\$55.07
	Moderate Sedation Services By Physician Also Performing A Procedure, Additional 15 Minutes	\$11.66
	Moderate Sedation Services By Physician Not Performing A Procedure, Patient Younger Than 5 Years Of Age, First 15 Minutes	\$83.32
	Moderate Sedation Services By Physician Not Performing A Procedure, Patient Founger Than 3 Years Of Age, First 15 Minutes Moderate Sedation Services By Physician Not Performing A Procedure, Patient 5 Years Of Age Or Older, First 15 Minutes	
		\$78.87 \$50.99
	Moderate Sedation Services By Physician Not Performing A Procedure, Each Additional 15 Minutes	\$59.88
99170	Examination Of Genital And Anal Region Of Child Using An Endoscope, Suspected Trauma	\$156.21
	Visual Function Screening, Automated Or Semi-Automated Bilateral Quantitative Determination Of Visual Acuity, Ocular Alignment, Color Vision	
99172	By Pseudoisochromatic Plates, And Field Of Vision (May Include All Or Some Screening Of The Determinati	\$15.58
	Screening Test Of Visual Acuity, Quantitative, Bilateral (The Screening Test Used Must Employ Graduated Visual Acuity Stimuli That Allow A	
99173	Quantitative Estimate Of Visual Acuity (Eg, Snellen Chart). Other Identifiable Services Unrelated To This Screening	\$15.11
	Ipecac Or Similar Administration For Individual Emesis And Continued Observation Until Stomach Adequately Emptied Of Poison	\$27.58
	Instrument Based Eye Screening Of Both Eyes With Analysis	Price By Report
	Physician Or Other Qualified Health Care Professional Attendance And Supervision Of Hyperbaric Oxygen Therapy, Per Session	\$108.16
	Initiation Of Lowering Head Or Total Body Temperature In Neonate	\$223.74
	Application Of Topical Fluoride	\$32.20
	Application of replical Fluoride Assembly And Operation Of Heart-Lung Machine, Each Hour	\$32.20 \$123.88
	Assembly And Operation Of Heart-Lung Machine, 45 Minutes	\$70.28
	Assembly And Operation Of Heart-Lung Machine, 30 Minutes	\$51.90
	Phlebotomy, Therapeutic (Separate Procedure)	\$87.28
	New Patient Office Or Other Outpatient Visit With Straightforward Medical Decision Making, If Using Time, 15 Minutes Or More	\$63.63
99203	New Patient Office Or Other Outpatient Visit With Low Level Of Medical Decision Making, If Using Time, 30 Minutes Or More	\$94.58
99204	New Patient Office Or Other Outpatient Visit With Moderate Level Of Medical Decision Making, If Using Time, 45 Minutes Or More	\$134.32
	New Patient Office Or Other Outpatient Visit With A High Level Of Medical Decision Making, If Using Time, 60 Minutes Or More	\$171.32
	Established Patient Outpatient Visit, Minimal Presenting Problem	\$20.48
	Established Patient Office Or Other Outpatient Visit With Straightforward Medical Decision Making, If Using Time, 10 Minutes Or More	\$38.71
	Established Patient Office Or Other Outpatient Visit With Low Level Od Decision Making, If Using Time, 20 Minutes Or More	\$62.22
	Established Patient Office Or Other Outpatient Visit With Moderate Level Of Decision Making, If Using Time, 30 Minutes Or More	\$88.05
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99386Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag\$69.7699387Initial New Patient Preventive Medicine Evaluation, Age 65 Years And Older\$67.0699391Established Patient Periodic Preventive Medicine Examination Infant Younger Than 1 Year\$81.5999392Established Patient Periodic Preventive Medicine Examination, Age 1 Through 4 Years\$81.5999393Established Patient Periodic Preventive Medicine Examination, Age 5 Through 11 Years\$81.5999394Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years\$81.5999395Established Patient Periodic Preventive Medicine Examination Age 18-39 Years\$81.5999397Established Patient Periodic Preventive Medicine Examination Age 40-64 Years\$81.5999397Established Patient Periodic Preventive Medicine Examination, Age 65 Years And Older\$69.7699401Preventive Medicine Counseling, Typically 15 Minutes\$6.5699402Preventive Medicine Counseling, Typically 30 Minutes\$5.7999403Preventive Medicine Counseling, Typically 45 Minutes\$5.7999406Preventive Medicine Counseling, Typically 1 Hour\$15.8199407Smoking And Tobacco Use Intensive Counseling, Greater Than 10 Minutes\$30.6499417Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total TimePrice By Report	99385		\$119.83
99387 Initial New Patient Preventive Medicine Evaluation, Age 65 Years And Older 99391 Established Patient Periodic Preventive Medicine Examination Infant Younger Than 1 Year 99392 Established Patient Periodic Preventive Medicine Examination, Age 1 Through 4 Years 99393 Established Patient Periodic Preventive Medicine Examination, Age 5 Through 11 Years 99394 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years 99395 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years 99396 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years 99397 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years 99397 Established Patient Periodic Preventive Medicine Examination, Age 65 Years And Older 99401 Preventive Medicine Counseling, Typically 15 Minutes 99402 Preventive Medicine Counseling, Typically 30 Minutes 99403 Preventive Medicine Counseling, Typically 45 Minutes 99406 Preventive Medicine Counseling, Typically 1 Hour 99407 Smoking And Tobacco Use Intensive Counseling, Greater Than 10 Minutes 99407 Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total Time Price By Report	1	Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,	
99391 Established Patient Periodic Preventive Medicine Examination Infant Younger Than 1 Year \$81.59 99392 Established Patient Periodic Preventive Medicine Examination, Age 1 Through 4 Years \$81.59 99393 Established Patient Periodic Preventive Medicine Examination, Age 5 Through 11 Years \$81.59 99394 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years \$81.59 99395 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years \$81.59 99396 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years \$89.76 99397 Established Patient Periodic Preventive Medicine Examination, Age 65 Years And Older \$69.76 99401 Preventive Medicine Counseling, Typically 15 Minutes \$5.79 99402 Preventive Medicine Counseling, Typically 30 Minutes \$5.79 99403 Preventive Medicine Counseling, Typically 45 Minutes \$5.79 99406 Preventive Medicine Counseling, Typically 45 Minutes \$5.79 99407 Smoking And Tobacco Use Intensive Counseling, Greater Than 10 Minutes \$30.64			\$69.76
99392 Established Patient Periodic Preventive Medicine Examination, Age 1 Through 4 Years 99393 Established Patient Periodic Preventive Medicine Examination, Age 5 Through 11 Years 99394 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years 99395 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years 99396 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years 99397 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years 99398 Preventive Medicine Counseling, Typically 15 Minutes 99400 Preventive Medicine Counseling, Typically 30 Minutes 99403 Preventive Medicine Counseling, Typically 45 Minutes 99404 Preventive Medicine Counseling, Typically 45 Minutes 99405 Preventive Medicine Counseling, Typically 1 Hour 99407 Smoking And Tobacco Use Intensive Counseling, Greater Than 10 Minutes 99407 Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total Time Price By Report			\$67.06
99393 Established Patient Periodic Preventive Medicine Examination, Age 5 Through 11 Years 99394 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years 99395 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years 99396 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years 99397 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years 99398 Preventive Medicine Counseling, Typically 15 Minutes 99400 Preventive Medicine Counseling, Typically 30 Minutes 99403 Preventive Medicine Counseling, Typically 45 Minutes 99404 Preventive Medicine Counseling, Typically 45 Minutes 99405 Preventive Medicine Counseling, Typically 1 Hour 99407 Smoking And Tobacco Use Intensive Counseling, Greater Than 10 Minutes 99407 Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total Time Price By Report		<u> </u>	\$81.59
99394 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years 99395 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years 99396 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years 99397 Established Patient Periodic Preventive Medicine Examination, Age 65 Years And Older 99401 Preventive Medicine Counseling, Typically 15 Minutes 99402 Preventive Medicine Counseling, Typically 30 Minutes 99403 Preventive Medicine Counseling, Typically 45 Minutes 99406 Preventive Medicine Counseling, Typically 1 Hour 99407 Smoking And Tobacco Use Intensive Counseling, Greater Than 10 Minutes 99407 Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total Time \$81.59			\$81.59
99395 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years 99396 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years 99397 Established Patient Periodic Preventive Medicine Examination, Age 65 Years And Older 99401 Preventive Medicine Counseling, Typically 15 Minutes 99402 Preventive Medicine Counseling, Typically 30 Minutes 99403 Preventive Medicine Counseling, Typically 45 Minutes 99406 Preventive Medicine Counseling, Typically 45 Minutes 99407 Smoking And Tobacco Use Intensive Counseling, Greater Than 10 Minutes 99407 Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total Time Price By Report			\$81.59
99396Established Patient Periodic Preventive Medicine Examination Age 40-64 Years\$69.7699397Established Patient Periodic Preventive Medicine Examination, Age 65 Years And Older\$69.7699401Preventive Medicine Counseling, Typically 15 Minutes\$5.5699402Preventive Medicine Counseling, Typically 30 Minutes\$5.7999403Preventive Medicine Counseling, Typically 45 Minutes\$5.7999406Preventive Medicine Counseling, Typically 1 Hour\$15.8199407Smoking And Tobacco Use Intensive Counseling, Greater Than 10 Minutes\$30.6499417Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total TimePrice By Report			\$81.59
99397Established Patient Periodic Preventive Medicine Examination, Age 65 Years And Older\$69.7699401Preventive Medicine Counseling, Typically 15 Minutes\$6.5699402Preventive Medicine Counseling, Typically 30 Minutes\$5.7999403Preventive Medicine Counseling, Typically 45 Minutes\$5.7999406Preventive Medicine Counseling, Typically 4 Hour\$15.8199407Smoking And Tobacco Use Intensive Counseling, Greater Than 10 Minutes\$30.6499417Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total TimePrice By Report			\$81.59
99401 Preventive Medicine Counseling, Typically 15 Minutes 99402 Preventive Medicine Counseling, Typically 30 Minutes 99403 Preventive Medicine Counseling, Typically 45 Minutes 99406 Preventive Medicine Counseling, Typically 45 Minutes 99407 Smoking And Tobacco Use Intensive Counseling, Greater Than 10 Minutes 99417 Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total Time \$6.56 \$5.79 99408 Preventive Medicine Counseling, Typically 1 Hour \$15.81 \$30.64			\$69.76
99402 Preventive Medicine Counseling, Typically 30 Minutes 99403 Preventive Medicine Counseling, Typically 45 Minutes 99406 Preventive Medicine Counseling, Typically 45 Minutes 99407 Smoking And Tobacco Use Intensive Counseling, Greater Than 10 Minutes 99417 Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total Time \$5.79 \$5.79 \$5.79 \$5.79 \$7.70 \$			\$69.76
99403 Preventive Medicine Counseling, Typically 45 Minutes 99406 Preventive Medicine Counseling, Typically 1 Hour 99407 Smoking And Tobacco Use Intensive Counseling, Greater Than 10 Minutes 99407 Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total Time 99408 Preventive Medicine Counseling, Typically 45 Minutes \$15.81 \$30.64 99417 Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total Time Price By Report			
99406Preventive Medicine Counseling, Typically 1 Hour\$15.8199407Smoking And Tobacco Use Intensive Counseling, Greater Than 10 Minutes\$30.6499417Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total TimePrice By Report			
99407 Smoking And Tobacco Use Intensive Counseling, Greater Than 10 Minutes \$30.64 99417 Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total Time Price By Report			
99417 Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total Time Price By Report			
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		Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total Time Prolonged Inpatient Or Observation Service, Each 15 Minutes Of Total Time Beyond Required Time Of Primary Service	Price By Report Price By Report

99454	Description	Fee \$17.39
99454		φ17.39
		\$45.14
99457	Remote Physiologic Monitoring Treatment Management Services, Health Care Professional Time In A Calendar Month Requiring Interactive	* -
	Communication With The Patient/Caregiver; First 20 Minutes	\$43.92
00450	Remote Physiologic Monitoring Treatment Management Services, Health Care Professional Time in A Calendar Month Requiring Interactive	#05.00
	Communication With The Patient/Caregiver; Each Additional 20 Minute Pelvic exam	\$35.69
99459	Initial Hospital Or Birthing Center Care, Per Day, For Evaluation And Management Of Normal Newborn Infant	\$20.04 \$98.54
	Initial Care, Per Day, For Evaluation And Management Of Normal Newborn Infant Seen In Other Than Hospital Or Birthing Center	\$63.34
	Subsequent Hospital Care, Per Day, For Evaluation And Management Of Normal Newborn	\$42.30
33402	Initial Hospital Or Birthing Center Care. Per Day, For Evaluation And Management Of Normal Newborn Infant Admitted And Discharged On The	ψτ2.50
99463	Same Date	\$104.59
	Attendance At Delivery (When Requested By The Delivering Physician Or Other Qualified Health Care Professional) And Initial Stabilization Of	·
99464	Newborn	\$81.73
	Delivery/Birthing Room Resuscitation, Provision Of Positive Pressure Ventilation And/Or Chest Compressions In The Presence Of Acute	
	Inadequate Ventilation And/Or Cardiac Output	\$166.13
	Critical Care Of III Or Injured Pediatric Patient, 24 Months Or Younger, First 30-74 Minutes	\$266.41
	Critical Care Of III Or Injured Pediatric Patient, 24 Months Or Younger	\$133.80
	Initial Inpatient Hospital Critical Care Of Newborn, 28 Days Of Age Or Younger, Per Day	\$987.09
	Subsequent Inpatient Hospital Critical Care Of Newborn, 28 Days Of Age Or Younger, Per Day	\$520.15
	Initial Inpatient Hospital Critical Care Of Infant Or Young Child, 29 Days Through 24 Months Of Age, Per Day	\$929.83
	Subsequent Inpatient Hospital Critical Care Of Infant Or Young Child, 29 Days Through 24 Months Of Age, Per Day	\$486.32
	Initial Inpatient Hospital Critical Care Of Infant Or Young Child, 2 Through 5 Years Of Age, Per Day	\$604.81
	Subsequent Inpatient Hospital Critical Care Of Infant Or Young Child, 2 Through 5 Years Of Age, Per Day	\$362.92
	Initial Intensive Care Of Newborn, 28 Days Of Age Or Younger, Per Day Subsequent Intensive Care Of Recovering Very Low Birth Weight Infant, Per Day	\$384.99 \$227.30
	Subsequent Intensive Care Of Recovering Low Birth Weight Infant, Per Day (1500-2500 Grams)	\$167.06
	Subsequent Intensive Care Of Recovering Low Birth Weight Infant, Per Day (2501-5000 Grams)	\$229.43
	Supervision Of Interfacility Transport Care Of The Critical Patient, 24 Months Of Age Or Younger, First 30 Minutes	\$0.01
	Supervision of Interfacility Transport Care of The Critical Patient, 24 Months of Age or Younger	\$0.01
	Advance Care Planning, First 30 Minutes	\$76.93
	Advance Care Planning, Each Additional 30 Minutes	\$66.65
	Child Advocacy Program Forensic Interview	\$309.40
	Home Visit For Assessment And Monitoring Of Pregnancy, Fetal Heart Rate, And Diabetes Status	\$78.58
99502	Home Visit For Newborn Care And Assessment	\$78.58
99600	Other Home Visit Service Or Procedure	\$27.85
99601	Home Infusion Or Specialty Drug Administration, Per Visit, 2 Hours Or Less	Price By Report
99602	Home Infusion Or Specialty Drug Administration, Per Visit, Each Additional Hour	Price By Report
	Initial Prenatal Care Visit (Report At First Prenatal Encounter With Health Care Professional Providing Obstetrical Care. Report Also Date Of	
)500F	Visit And, In A Separate Field, The Date Of The Last Menstrual Period ÝImp") (Prenatal)	\$10.50
3074F	Most Recent Systolic Blood Pressure Less Than 130 Mm Hg (Dm), (Htn, Ckd Cad)	\$0.01
3075F	Most Recent Systolic Blood Pressure 130 - 139 Mm Hg (Dm)	\$0.01
3077F	Most Recent Systolic Blood Pressure Greater Than Or Equal To 140 Mm Hg (Htn, Ckd, Cad) (Dm)	\$0.01
3078F	Most Recent Diastolic Blood Pressure Less Than 80 Mm Hg (Htn, Ckd, Cad) (Dm)	\$0.01
3079F	Most Recent Diastolic Blood Pressure 80-89 Mm Hg (Htn, Ckd, Cad) (Dm) Most Recent Diastolic Blood Pressure Greater Than Or Equal To 90 Mm Hg (Htn, Ckd, Cad) (Dm)	\$0.01
3080F		\$0.01
)234T	Catheter Removal Of Plaque From Kidney Artery, Accessed Through The Skin Or Open Procedure Including Radiological Supervision And Interpretation	Price By Report
72341	Catheter Removal Of Plaque From Organ Artery, Accessed Through The Skin Or Open Procedure Including Radiological Supervision And	Trice by Report
)235T	Interpretation	Price By Report
)236T	Transluminal Peripheral Atherectomy, Open Or Percutaneous, Including Radiological Supervision And Interpretation; Abdominal Aorta	Price By Report
)00 7 -	Catheter Removal Of Plaque From Upper Arm Artery, Accessed Through The Skin Or Open Procedure Including Radiological Supervision And	Delet De D
)23/1		Price By Report
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		Price By Report Price By Report
		Price By Report
		1 noo by Report
)264T		Price By Report
	Intramuscular Autologous Bone Marrow Cell Therapy, With Preparation Of Harvested Cells, Multiple Injections, One Leg, Including Ultrasound	2,opon
)265T	Guidance, If Performed; Unilateral Or Bilateral Bone Marrow Harvest Only For Intramuscular Autologous Bon	Price By Report
	Implantation Or Replacement Of Carotid Sinus Baroreflex Activation Device; Total System (Includes Generator Placement, Unilateral Or	
)266T	Bilateral Lead Placement, Intra-Operative Interrogation, Programming, And Repositioning, When Performed)	Price By Report
)267T	Programming, And Repositioning, When Performed)	Price By Report
	Implantation Or Replacement Of Carotid Sinus Baroreflex Activation Device; Pulse Generator Only (Includes Intra-Operative Interrogation,	
)268T	Programming, And Repositioning, When Performed)	Price By Report
)269T		Price By Report
		Date B. D.
)270T	Programming, And Repositioning, When Performed)	Price By Report
12747	Revision Or Removal Of Carotid Sinus Baroreflex Activation Device; Pulse Generator Only (Includes Intra-Operative Interrogation,	Drice Dy Daniel
)271T	Programming, And Repositioning, When Performed)	Price By Report
	Interrogation Device Evaluation (In Person), Carotid Sinus Baroreflex Activation System, Including Telemetric Iterative Communication With The	Price By Report
)272T	Implantable Device To Monitor Device Diagnostics And Programmed Therapy Values, With Interpretation And Repo	
0266T 0267T 0268T 0269T	Guidance, If Performed; Unilateral Or Bilateral Bone Marrow Harvest Only For Intramuscular Autologous Bon Implantation Or Replacement Of Carotid Sinus Baroreflex Activation Device; Total System (Includes Generator Placement, Unilateral Or Bilateral Lead Placement, Intra-Operative Interrogation, Programming, And Repositioning, When Performed) Implantation Or Replacement Of Carotid Sinus Baroreflex Activation Device; Pulse Generator Only (Includes Intra-Operative Interrogation, Programming, And Repositioning, When Performed) Revision Or Removal Of Carotid Sinus Baroreflex Activation Device; Total System (Includes Generator Placement, Unilateral Or Bilateral Lead Placement, Intra-Operative Interrogation, Programming, And Repositioning, When Performed) Revision Or Removal Of Carotid Sinus Baroreflex Activation Device; Lead Only, Unilateral (Includes Intra-Operative Interrogation,	

Code	Description	Fee
0274T	Removal Of Bone From Upper Or Middle Spine For Decompression Of Nerve Tissue Using Imaging Guidance, Accessed Through The Skin	Price By Report
0275T	Removal Of Bone From Lower Spine For Decompression Of Nerve Tissue Using Imaging Guidance, Accessed Through The Skin	Price By Report
0278T	Transcutaneous Electrical Modulation Pain Reprocessing (Eg, Scrambler Therapy), Each Treatment Session (Includes Placement Of Electrodes)	Price By Report
0394T	High Dose Rate Electronic Brachytherapy, External	Price By Report
0395T	High Dose Rate Electronic Brachytherapy, Internal	Price By Report
0402T	Collagen Cross-Linking Treatment of Disease Of Cornea	Price By Report
0479T	Laser Destruction Of Scar Tissue, First 100 Cm2, Or 1% Of Body Surface Area Of Infants And Children	\$437.35
0480T	Laser Destruction Of Scar Tissue, Each Additional 100 Cm2, Or 1% Of Body Surface Area Of Infants And Children	\$92.09
0537T 0538T	Blood Drv T Lymphcyt Cat-T Cell Blood Drv T Lymphcyt Prep Trns	Price By Report \$0.01
0539T	Receipt&Prep Car-T Cell Admn	\$0.01
0540T	Car-T Cell Admn Autologous	Price By Report
	Repair Of Valve Between Upper Left And Lower Left Chambers Of Heart (Mitral Valve) With Insertion Of Artificial Supporting Tendons,	, ,
0543T	Accessed Through Apex Of Heart Reconstruction Of Junction Between Upper Left And Lower Left Chambers Of Heart (Annulus Of Mitral Valve) With Implantation Of Adjustable	Price By Report
0544T	Reconstruction Device, Via Catheter, Accessed Through Skin	Price By Report
0545T	Reconstruction Of Junction Between Upper Right And Lower Right Chambers Of Heart (Annulus Of Tricuspid Valve) With Implantation Of Adjustable Reconstruction Device, Via Catheter, Accessed Through Skin	Price By Report
0546T	Radiofrequency Spectroscopy Evaluation Of Surgical Margins During Partial Mastectomy, With Report	Price By Report
0547T	Bone Material Quality Testing By Microindentations Of Shin Bone	Price By Report
	Insertion Of Implant Connecting Groin Artery And Groin Vein, With Radiological Supervision And Interpretation And Imaging Guidance, Via	, ,
0553T	Catheter, Accessed Through Skin	Price By Report
0564T	Evaluation Of Toxicity Of Chemotherapy Drugs On Cancer Stem Cells	Price By Report
0565T	Harvesting Of Fatty Tissue And Creation Of Cellular Implant For Treatment Of Osteoarthritis	Price By Report
0566T	Injection Of Fatty Tissue Cellular Implant For Treatment Of Osteoarthritis In Knee, Using Ultrasound Guidance	Price By Report
0568T	Introduction Of Saline And Air Into Fallopian Tubes To Test For Blockage Repair Of Valve Between Upper Right And Lower Right Chambers Of Heart (Tricuspid Valve) Using Prosthesis Delivered Via Catheter,	Price By Report
0569T	Accessed Through Skin; Initial Prosthesis Repair Of Valve Between Upper Right And Lower Right Chambers Of Heart (Tricuspid Valve) Using Prosthesis Delivered Via Catheter,	Price By Report
0570T	Accessed Through Skin; Each Additional Prosthesis	Price By Report
0571T	Insertion Or Replacement Of Implantable Cardioverter-Defibrillator System With Electrodes Under Breastbone	Price By Report
0572T	Insertion Of Implantable Defibrillator Electrode Under Breastbone	Price By Report
	Removal Of Implantable Defibrillator Electrode From Under Breastbone	Price By Report
0574T	Repositioning Of Previously Implanted Defibrillator Electrode Under Breastbone In-Person Programming Device Evaluation Of Implantable Cardioverter-Defibrillator System With Electrode Under Breastbone, With Analysis,	Price By Report
0575T	Review And Report In-Person Interrogation Device Evaluation of Implantable Cardioverter-Defibrillator System With Electrode Under Breastbone, With Analysis, In-Person Interrogation Device Evaluation of Implantable Cardioverter-Defibrillator System With Electrode Under Breastbone, With Analysis,	Price By Report
0576T	Review And Report Electrophysiological Evaluation Of Implantable Cardioverter-Defibrillator System With Electrode Under Breastbone, With Analysis, Review And Electrophysiological Evaluation Of Implantable Cardioverter-Defibrillator System With Electrode Under Breastbone, With Analysis, Review And	Price By Report
0577T	Report	Price By Report
0578T	Remote Interrogation Device Evaluation Of Implantable Cardioverter-Defibrillator System With Lead Under Breastbone, With Analysis, Review And Report By Healthcare Professional	Price By Report
	Remote Interrogation Device Evaluation Of Implantable Cardioverter-Defibrillator System With Lead Under Breastbone, With Remote Data	D: D D
	Acquisitions, Receipt Of Transmissions And Technician Review, Technical Support And Distribution Of Results	Price By Report
0580T 0581T	Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin	Price By Report Price By Report
0582T	High-Energy Water Vapor Heat Destruction Of Malignant Prostate Tissue, Including Imaging And Needle Guidance	Price By Report
0583T	Insertion Of Ventilating Tube In Eardrum Using An Automated Tube Delivery System Under Local Anesthesia	\$1,813.10
	Transplantation Of Insulin-Producing Cells, Via Catheter Accessed Through Skin Using Imaging Guidance	Price By Report
0585T	Transplantation Of Insulin-Producing Cells Using Endoscope Inserted Through Wall Of Abdomen	Price By Report
0586T	Transplantation Of Insulin-Producing Cells, Open Procedure	Price By Report
0587T	Implantation Or Replacement Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin	Price By Report
0588T	Revision Or Removal Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin	Price By Report
0589T	Electronic Analysis With Simple Programming Of Posterior Nerve Stimulating System For Bladder Dysfunction	Price By Report
0590T 0594T	Electronic Analysis With Complex Programming Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction Incision Of Upper Arm Bone And Insertion Of Bone-Lengthening Device In Marrow Cavity	Price By Report Price By Report
0596T	Initial Insertion Of Temporary Valve-Pump In Female Urethra	Price By Report
0597T	Replacement Of Temporary Valve-Pump In Female Urethra	Price By Report
0598T	Fluorescence Wound Imaging For Bacteria, First Anatomic Site	Price By Report
0599T	Fluorescence Wound Imaging For Bacteria, Each Additional Anatomic Site	Price By Report
0600T	Irreversible Electroporation Destruction Of Growths Of Internal Organ, Accessed Through Skin	Price By Report
0601T	Irreversible Electroporation Destruction Of Growths Of Internal Organ, Open Procedure	Price By Report
0602T	Measurement Of Kidney Filtration Rate Using Skin Sensor And Single Dose Of Fluorescent Agent	Price By Report
0603T 0604T	Monitoring Of Kidney Filtration Rate Using Skin Sensor And Multiple Doses Of Fluorescent Agent Provision Of Device And Patient Education For Remote Oct Imaging Of Retina	Price By Report
06041 0605T	Technical Support, Data Analyses And Report Of Remote Oct Imaging Of Retina	Price By Report Price By Report
0605T	Physician Review, Interpretation And Report Of Remote Oct Imaging Of Retina	Price By Report
0607T	Set-Up And Patient Education For Remote Monitoring Of Lung Fluid Monitoring System	Price By Report
0608T	Data Analysis And Report Transmission To Health Care Professional For Remote Monitoring Of Lung Fluid Monitoring System	Price By Report
0609T	Acquisition Of Mr Spectroscopy Data On Biomarkers For Spinal Disc Pain	Price By Report
0610T	Transmission Of Mr Spectroscopy Data On Biomarkers For Spinal Disc Pain	Price By Report
0611T	Analysis Of Mr Spectroscopy Data On Biomarkers For Spinal Disc Pain	Price By Report
0612T	Interpretation And Report Of Mr Spectroscopy Data On Biomarkers For Spinal Disc Pain	Price By Report
0613T 0614T	Implantation Of Shunt In Partition Between Upper Heart Chambers Via Catheter, Accessed Through Skin Removal And Replacement Of Substernal Implantable Defibrillator Pulse Generator	Price By Report
00141	Tromoval And Tropiacement Of Substemal Implantable Dehibilitator Luise Generator	Price By Report

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	Description Communication of the Communication and Description	Fee
	Eye-Movement Analysis With Interpretation And Report Insertion Of Iris Prosthesis Into Eye	Price By Report
0616T 0617T	Insertion Of Iris Prosthesis Into Eye With Removal Of Lens And Insertion Of Artificial Lens	Price By Report Price By Report
06171 0618T	Insertion Of Iris Prosthesis Into Eye With Nenroval Creens And Insertion Of Artificial Lens Insertion Of Iris Prosthesis Into Eye With Insertion Or Replacement of Artificial Lens	Price By Report
0619T	Examination Of Urethra And Bladder With Incision Of Opening Of Prostate Gland And Drug Delivery Using Endoscope	Price By Report
0620T	Insertion Of Stent To Shunt Arterial Blood To Deep Vein Of Lower Leg Via Catheter Using Imaging Guidance	Price By Report
0621T	Laser Incision of Drainage Tissue Within Eve (Trabecular Meshwork)	Price By Report
0622T	Laser Incision Of Drainage Tissue Within Eye (Trabecular Meshwork) Using Ocular Endoscope	Price By Report
OOZZI	Preparation, Transmission And Computerized Analysis Of Ct Angiography Data On Plaque In Heart Arteries, With Review, Interpretation, And	T noo by resport
0623T	Report	Price By Report
	Preparation And Transmission Of Ct Angiography Data On Plaque In Heart Arteries	Price By Report
	Computerized Analysis Of Ct Angiography Data On Plaque In Heart Arteries	Price By Report
0626T	Review Of Computerized Analysis Of Ct Angiography Data On Plaque In Heart Arteries, With Interpretation, And Report	Price By Report
0627T	Injection Of Cell Or Tissue-Based Material Into Spinal Disc Of Lower Back Accessed Through Skin, First Level	Price By Report
0628T	Injection Of Cell Or Tissue-Based Material Into Spinal Disc Of Lower Back Accessed Through Skin, Each Additional Level	Price By Report
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0629T	Injection Of Cell Or Tissue-Based Material Into Spinal Disc Of Lower Back Accessed Through Skin Using Ct Imaging Guidance, First Level	Price By Report
	Injection Of Cell Or Tissue-Based Material Into Spinal Disc Of Lower Back Accessed Through Skin Using Ct Imaging Guidance, Each Additional	•
0630T	Level	Price By Report
0631T	Measurement Of Oxygenation Of Limb Using Visible Light Imaging, With Interpretation And Report	Price By Report
0632T	Destruction Of Nerves To Main Arteries Of Lung, Accessed Through Skin Via Catheter Using Imaging Guidance	Price By Report
0633T	Ct Of One Breast With 3D Rendering	Price By Report
0634T	Ct Of One Breast With Contrast And 3D Rendering	Price By Report
0635T	Ct Of One Breast Before And After Contrast With 3D Rendering	Price By Report
0636T	Ct Of Both Breasts With 3D Rendering	Price By Report
0637T	Ct Of Both Breasts With Contrast And 3D Rendering	Price By Report
0638T	Ct Of Both Breasts Before And After Contrast With 3D Rendering	Price By Report
0639T	Wireless Skin Sensor Evaluation Of Flow In Cerebrospinal Fluid Shunt Using Ultrasound Guidance	Price By Report
0643T	Implantation Of Restoration Device Into Left Lower Chamber Of Heart Through Catheter	Price By Report
0644T	Removal Or Reduction Of Mass Within Heart By Suction Through Catheter	Price By Report
0645T	Implantation Of Coronary Sinus Reduction Device In Heart Through Catheter	Price By Report
0646T	Implantation Of Artificial Valve Between Right Upper And Lower Chambers Of Heart Through Catheter	Price By Report
0647T	Insertion Of Tube Into Stomach Through Skin Using Ultrasound Guidance	Price By Report
0652T	Diagnostic Inspection Of Esophagus, Stomach, And Upper Small Intestine Using A Flexible Endoscope Through Nose	Price By Report
0653T	Inspection Of Esophagus, Stomach, And Upper Small Intestine With Biopsy Using A Flexible Endoscope Through Nose	Price By Report
0654T	Inspection Of Esophagus, Stomach, And Upper Small Intestine With Insertion Of Tube Or Catheter Using A Flexible Endoscope Through Nose	Price By Report
0655T	Destruction Of Prostate Cancer Tissue By Laser Using Ultrasound Guidance	Price By Report
0656T	Tethering Of 7 Or Fewer Lower Spine Bones	Price By Report
0657T	Tethering Of 8 Or More Lower Spine Bones	Price By Report
0659T	Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist	Price By Report
0660T	Implantation Of Drug-Releasing Device In Front Chamber Of Eye	Price By Report
0661T	Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye	
	Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp	Price By Report
0662T	initial Measurement And Calibration of Cap For Mechanical Cooling of Scalp	Price By Report Price By Report
0663T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp	Price By Report Price By Report
0663T 0671T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork)	Price By Report
0663T 0671T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp	Price By Report Price By Report
0663T 0671T 0714T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score	Price By Report Price By Report Price By Report
0663T 0671T 0714T 0716T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For	Price By Report
0663T 0671T 0714T 0716T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear	Price By Report
0663T 0671T 0714T 0716T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound	Price By Report
0663T 0671T 0714T 0716T 0717T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T 0721T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T 0721T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T 0721T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T 0721T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report	Price By Report
0663T 0671T 0714T 0716T 0716T 0717T 0718T 0719T 0720T 0722T 0722T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T 0721T 0722T 0723T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report And Report And With Diagnostic Magnetic Resonance Imaging	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T 0722T 0722T 0723T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report And With Diagnostic Magnetic Resonance Imaging Spect Measurement Of Blood Flow To Heart Muscle	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T 0722T 0722T 0723T 0724T 0742T 0744T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report And With Diagnostic Magnetic Resonance Imaging Spect Measurement Of Blood Flow To Heart Muscle Insertion Of Bioprosthetic Valve In Vein Of Thigh (Femoral Vein)	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T 0722T 0722T 0723T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report And With Diagnostic Magnetic Resonance Imaging Spect Measurement Of Blood Flow To Heart Muscle Insertion Of Bioprosthetic Valve In Vein Of Thigh (Femoral Vein) Instillation Of Stool Microorganism Suspension Via Rectal Enema Into Lower Digestive Tract	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T 0722T 0722T 0723T 0724T 0744T 0780T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report And With Diagnostic Magnetic Resonance Imaging Spect Measurement Of Blood Flow To Heart Muscle Insertion Of Bioprosthetic Valve In Vein Of Thigh (Femoral Vein) Instillation Of Stool Microorganism Suspension Via Rectal Enema Into Lower Digestive Tract Insertion Of Protection Device In Esophagus And Radiofrequency Destruction Of Nerves To Lung In Mainstem Airway On One Side Of Body	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T 0722T 0722T 0723T 0724T 0742T 0744T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report And With Diagnostic Magnetic Resonance Imaging Spect Measurement Of Blood Flow To Heart Muscle Insertion Of Bioprosthetic Valve In Vein Of Thigh (Femoral Vein) Instillation Of Stool Microorganism Suspension Via Rectal Enema Into Lower Digestive Tract	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0722T 0722T 0723T 0724T 0744T 0780T 0781T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint in Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report And With Diagnostic Magnetic Resonance Imaging Spect Measurement Of Blood Flow To Heart Muscle Insertion Of Bioprosthetic Valve In Vein Of Thigh (Femoral Vein) Instillation Of Stool Microorganism Suspension Via Rectal Enema Into Lower Digestive Tract Insertion Of Protection Device In Esophagus And Radiofrequency Destruction Of Nerves To Lung In Mainstem Airway On One Side Of Body Using Endoscope	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T 0721T 0722T 0723T 0744T 0780T 0781T 0782T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report And With Diagnostic Magnetic Resonance Imaging Spect Measurement Of Blood Flow To Heart Muscle Insertion Of Bioprosthetic Valve In Vein Of Thigh (Femoral Vein) Instillation Of Stool Microorganism Suspension Via Rectal Enema Into Lower Digestive Tract Insertion Of Protection Device In Esophagus And Radiofrequency Destruction Of Nerves To Lung In Both Mainstem Airways Using Endoscope Insertion Of Protection Device In Esophagus And Radio	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T 0721T 0722T 0723T 0744T 0780T 0781T 0782T 0784T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report And With Diagnostic Magnetic Resonance Imaging Spect Measurement Of Blood Flow To Heart Muscle Insertion Of Bioprosthetic Valve In Vein Of Thigh (Femoral Vein) Instillation Of Stool Microorganism Suspension Via Rectal Enema Into Lower Digestive Tract Insertion Of Protection Device In Esophagus And Radiofrequency Destruction Of Nerves To Lung In Mainstem Airways Using Endoscope Insertion Of Protection Device In Esophagus And Radiofreque	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T 0722T 0722T 0723T 0744T 0780T 0781T 0782T 0784T 0785T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report And With Diagnostic Magnetic Resonance Imaging Spect Measurement Of Blood Flow To Heart Muscle Insertion Of Bioprosthetic Valve In Vein Of Thigh (Femoral Vein) Instillation Of Stool Microorganism Suspension Via Rectal Enema Into Lower Digestive Tract Insertion Of Protection Device In Esophagus And Radiofrequency Destruction Of Nerves To Lung In Mainstem Airway On One Side Of Body Unsing Endoscope Insertion Of Protection Device In Esoph	Price By Report
0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T 0722T 0722T 0723T 0744T 0781T 0781T 0784T 0786T 0786T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Simulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report And With Diagnostic Magnetic Resonance Imaging Spect Measurement Of Blood Flow To Heart Muscle Insertino Of Bioporsthetic Valve In Vein Of Thigh (Femoral Vein) Instillation Of Stool Microorganism Suspension Via Rectal Enema Into Lower Digestive Tract Insertion Of Bioporsthetic Valve In Vein Of Thigh (Femoral Vein) Insertion Of Protection Device In Esophagus And Radiofrequency Destruction Of Nerves To Lung In Mainstem Airway On One Side	Price By Report
0663T 0671T 0714T 0714T 0716T 0717T 0718T 0719T 0720T 0722T 0723T 0724T 0744T 0780T 0781T 0782T 0784T 0785T 0786T 0787T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nervers Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Data Preparation And Transmission, Interpretation And Report And With Diagnostic Magnetic Resona	Price By Report
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0663T 0671T 0714T 0716T 0717T 0718T 0719T 0720T 0721T 0722T 0723T 0744T 0744T 0780T 0781T 0782T 0782T 0782T 0782T	Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benip Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Omrcp), With Data Preparation And Transmission, Interpretation And Report Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Omrcp), With Data Preparation And Transmission, Interpretation And Report And With Diagnostic Magnetic Resonance Imaging Spect Measurement Of Blood Flow To Heart Muscle Insertion Of Bioprosthetic Valve In Vein Of Thigh (Femoral Vein) Instillation Of Stool Microorganism Suspension Via Rectal Enema Into Lower Digestive Tract Insertion Of Protection Device In Esophagus And Radiofrequency Destruction Of Nerves To Lung In Mainstem Airway On One Side Of Body Using Endoscope Insertion Of Protection Device In Esopha	Price By Report

Codo	Description	Foo
Code 0792T	Description Appl slvr diamn fluoride 38%	Fee Price by Report
07921	Percutaneous Transcatheter Thermal Ablation Of Pulmonary Artery Nerves, Including Right Heart Catheterization, Pulmonary Artery	Price by Report
0793T	Angiography, And All Imaging Guidance	Price By Report
	5.5 1 77	=)
	Patient-Specific, Assistive, Rules-Based Algorithm For Ranking Cancer Drug Treatment Options Based On The Patient'S Tumor-Specific	
0794T	Cancer Marker Information Obtained From Previous Laboratory Testing Which Have Been Previously Interpreted And Reported Separately	Price By Report
	Transcatheter Insertion Of Permanent Dual-Chamber Leadless Pacemaker Using Fluoroscopy And Device Interrogation Of Right Atrial And	
0795T	Right Ventricular Pacemaker Components	Price By Report
	Transcatheter Insertion Of Permanent Dual-Chamber Pacemaker Using Fluoroscopy And Device Interrogation Of Right Atrial Pacemaker	D: D D
0796T	Component Transport attacking Of A Permanent Dual Chamber Leadless Recomples Using Fluorescent And Davies Intercognics Of Bight Ventricular	Price By Report
0797T	Transcatheter Insertion Of A Permanent Dual Chamber Leadless Pacemaker Using Fluoroscopy And Device Interrogation Of Right Ventricular Pacemaker Component	Price By Report
0/9/1	Transcatheter Removal Of The Right Atrial And Right Ventricular Components Of A Permanent Dual-Chamber Leadless Pacemaker Using	Flice by Report
0798T	Fluoroscopy	Price By Report
0799T	Transcatheter Removal Of The Right Atrial Component Of A Permanent Dual-Chamber Leadless Pacemaker Using Fluoroscopy	Price By Report
0800T	Transcatheter Removal Of The Right Ventricular Component Of A Permanent Dual-Chamber Leadless Pacemaker Using Fluoroscopy	Price By Report
00001	Transcatheter Removal And Replacement Of Permanent Dual-Chamber Leadless Pacemaker Using Fluoroscopy And Device Interrogation Of	Trice by report
0801T	Right Atrial And Right Ventricular Components	Price By Report
	Transcatheter Removal And Replacement Of Permanent Dual-Chamber Leadless Pacemaker Using Fluoroscopy And Device Interrogation Of	1 1100 2y 110pon
0802T	Right Atrial Component	Price By Report
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0803T	Right Ventricular Component	Price By Report
	In-Person Programming Device Evaluation Of Dual-Chamber Leadless Pacemaker With Adjustment Of The Device To Test Function And To	
0804T	Select Optimal Permanent Values, With Analysis, Review And Report By A Physician Or Other Qualified Health Care Professional	Price By Report
0805T	Implantation Of A Superior And Inferior Vena Cava Artificial Valve Using The Femoral Vein Through The Skin	Price By Report
0806T	Open Implantation Of A Superior And Inferior Vena Cava Artificial Valve Using The Femoral Vein	Price By Report
	Analysis Of Lung Tissue Ventilation Using Software-Based Processing Of Cinefluorography Images And Previously Acquired Ct Images,	
0807T	Including Data Preparation And Transmission, Evaluation Of Lung Tissue Ventilation Data, Review, Interpretation, And Report	Price By Report
	Analysis Of Lung Tissue Ventilation Using Software-Based Processing Of Cinefluorography Images And Ct Images Taken For The Purpose Of	
	Lung Tissue Ventilation Analysis, Including Data Preparation And Transmission, Evaluation Of Lung Tissue Ventilation Data, Review,	
T8080	Interpretation, And Report	Price By Report
0810T	Subretinal Injection Of A Drug, Including Vitrectomy And Retinotomy Set-Up And Education On Use Of Equipment For Remoted Electronic Assessment Of Bladder Emptying	Price By Report
0811T	Device Supply And Report Generation For Remote Electronic Assessment Of Bladder Emptying For Up To 10 Days	Price By Report
0812T 0813T	Volume Adjustment Of Intragastric Bariatric Balloon Using A Flexible Endoscope Through The Mouth	Price By Report
0814T	Injection Through The Skin Of Calcium-Based Osteoconductive Material To Repair Upper Thigh Bone	Price By Report Price By Report
0815T	Ultrasound-Based Radiofrequency Echographic Multi-Spectrometry Scan For Measuring Bone Loss In Hips, Pelvis, Or Spine	Price By Report
0816T	Insertion Or Replacement Of Integrated Posterior Tibial Nerve Stimulating System Under The Skin, For Bladder Dysfunction	Price By Report
0817T	Insertion Or Replacement Of Integrated Posterior Tibial Nerve Stimulating System Under Muscle, For Bladder Dysfunction	Price By Report
0818T	Revision Or Removal Of Integrated Posterior Nerve Stimulating System Under Skin, For Bladder Dysfunction	Price By Report
0819T	Revision Or Removal Of Integrated Posterior Nerve Stimulating System Under Muscle, For Bladder Dysfunction	Price By Report
	Continuous In-Person Monitoring And Intervention During Psychedelic Medication Therapy, First Physician Or Other Qualified Health Care	
0820T	Professional, Each Hour	Price By Report
	Continuous In-Person Monitoring And Intervention During Psychedelic Medication Therapy, Second Physician Or Other Qualified Health Care	
0821T	Professional Working With The First Physician Or Other Qualified Health Care Professional, Each Hour	Price By Report
	Continuous In-Person Monitoring And Intervention During Psychedelic Medication Therapy Clinical Staff Working With The First Physician Or	D: D D
0822T	Other Qualified Health Care Professional, Each Hour	Price By Report
0823T	Insertion Of Permanent Single-Chamber Leadless Pacemaker For Pacing The Right Upper Heart Chamber Using Imaging Guidance	Price By Report
0824T	Removal Of Permanent Single-Chamber Leadless Pacemaker For Pacing The Right Upper Chamber Of The Heart Using Imaging Guidance	Price By Report
	Removal And Replacement Of Single-Chamber Permanent Leadless Pacemaker For Pacing The Right Upper Chamber Of The Heart Using	
0825T	Imaging Guidance	Price By Report
0826T	In-Person Device Evaluation Of Single-Chamber Leadless Pacemaker System Digitization Of Glass Microscope Stides For Cytopathology Of Fluids Washings Or Brushings Smears	Price By Report
0827T	Digitization Of Glass Microscope Slides For Cytopathology Of Fluids, Washings, Or Brushings, Smears Digitization Of Glass Microscope Slides For Cytopathology Of Fluids, Washings, Or Brushings, Simple Filter Method	Price By Report
0828T 0829T	Digitization Of Glass Microscope Slides For Cytopathology Of Fluids, Washings, Or Brushings, Simple Filter Method Digitization Of Glass Microscope Slides For Cytopathology, Concentration Technique	Price By Report Price By Report
0830T	Digitization Of Glass Microscope Slides For Cytopathology, Selective-Cellular Enhancement Technique	Price By Report
0831T	Digitization Of Glass Microscope Slides For Cytopathology Of Cervical Or Vaginal Specimen	Price By Report
0832T	Digitization Of Glass Microscope Slides For Cytopathology, Smears Requiring Screening And Interpretation	Price By Report
0833T	Digitization Of Glass Microscope Slides For Cytopathology, Smears Requiring Preparation, Screening And Interpretation	Price By Report
0834T	Digitization Of Glass Microscope Slides For Cytopathology, Smears Requiring Extended Study Of Over 5 Slides And/Or Multiple Stains	Price By Report
0835T	Digitization Of Glass Microscope Slides For Cytopathology Evaluation Of Fine Needle Aspirate, First Evaluation	Price By Report
0836T	Digitization Of Glass Microscope Slides For Cytopathology Evaluation Of Fine Needle Aspirate, Each Additional Evaluation	Price By Report
0837T	Digitization Of Glass Microscope Slides For Cytopathology Evaluation Of Fine Needle Aspirate	Price By Report
0838T	Digitization Of Glass Microscope Slides For Consultation And Report On Slides Prepared Elsewhere	Price By Report
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0839T	Digitization Of Glass Microscope Slides For Consultation And Report Requiring Preparation Of Slides Using Referred Material	
0839T 0840T	Digitization Of Glass Microscope Slides For Consultation And Report Requiring Preparation Of Slides Using Referred Material Digitization Of Glass Microscope Slides For Consultation, Comprehensive Review	Price By Report
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0840T	Digitization Of Glass Microscope Slides For Consultation, Comprehensive Review Digitization Of Glass Microscope Slides For Pathology Consultation During Surgery, First Tissue Block Digitization Of Glass Microscope Slides For Pathology Consultation During Surgery, Each Additional Tissue Block	Price By Report
0840T 0841T	Digitization Of Glass Microscope Slides For Consultation, Comprehensive Review Digitization Of Glass Microscope Slides For Pathology Consultation During Surgery, First Tissue Block	Price By Report Price By Report
0840T 0841T 0842T	Digitization Of Glass Microscope Slides For Consultation, Comprehensive Review Digitization Of Glass Microscope Slides For Pathology Consultation During Surgery, First Tissue Block Digitization Of Glass Microscope Slides For Pathology Consultation During Surgery, Each Additional Tissue Block Digitization Of Glass Microscope Slides For Pathology Consultation During Surgery, Cytologic Examination Of Initial Site Digitization Of Glass Microscope Slides For Pathology Consultation During Surgery, Cytologic Examination Of Each Additional Site	Price By Report Price By Report Price By Report
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4269 Contraceptive Supply, Spermicide (E.G., Foam, Gel), Each 9156 Oral Mucoadhesive, Any Type (Liquid, Gel, Paste, Etc.), Per 1 Ml 9292 Prescription Digital Visual Therapy, Software-Only, Fda Cleared, Per Course Of Treatment 9601 Flortaucipir F 18 Injection, Diagnostic, 1 Millicurie 9603 Injection, Pafolacianine, 0.1 Mg 9609 Fludeoxyglucose F18 Up To 15 Millicuries 9609 Fludeoxyglucose F18 Up To 15 Millicuries 9609 Radiopharmaceutical, Therapeutic, Not Otherwise Classified 9700 Supply Of Injectable Contrast Material For Use In Echocardiography, Per Study 9222 Deep Sedation/General Anesthesia - First 15 Minutes 9223 Deep Sedation/General Anesthesia - Each Subsequent 15 Minute Increment 9239 Intravenous Moderate (Conscious) Sedation/Analgesia - First 15 Minutes 9243 Intravenous Moderate (Conscious) Sedation/Analgesia - Each Subsequent 15 Minute Increment 0101 Cervical Or Vaginal Cancer Screening; Pelvic And Clinical Breast Examination 0102 Prostate Cancer Screening; Digital Rectal Examination 0104 Colorectal Cancer Screening; Piexible Sigmoidoscopy 0105 Colorectal Cancer Screening; Alternative To G0104, Screening Sigmoidoscopy, Barium Enema 0107 Glaucoma Screening For High Risk Patients Furnished By An Optometrist Or Ophthalmologist	\$1.9		
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Injection, Pafolacianine, 0.1 Mg	rice By Repo		A9601
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9700 Supply Of Injectable Contrast Material For Use In Echocardiography, Per Study 9222 Deep Sedation/General Anesthesia - First 15 Minutes 9223 Deep Sedation/General Anesthesia - Each Subsequent 15 Minute Increment 9239 Intravenous Moderate (Conscious) Sedation/Analgesia - First 15 Minutes 9243 Intravenous Moderate (Conscious) Sedation/Analgesia - Each Subsequent 15 Minute Increment 9293 Intravenous Moderate (Conscious) Sedation/Analgesia - Each Subsequent 15 Minute Increment 9200 Cervical Or Vaginal Cancer Screening; Pelvic And Clinical Breast Examination 9201 Prostate Cancer Screening; Digital Rectal Examination 9201 Colorectal Cancer Screening; Flexible Sigmoidoscopy 9201 Colorectal Cancer Screening; Colonoscopy On Individual At High Risk 9201 Colorectal Cancer Screening; Alternative To G0104, Screening Sigmoidoscopy, Barium Enema 9201 Glaucoma Screening For High Risk Patients Furnished By An Optometrist Or Ophthalmologist	rice By Repo		
Deep Sedation/General Anesthesia - First 15 Minutes Deep Sedation/General Anesthesia - Each Subsequent 15 Minute Increment Journal of Provided Format (Conscious) Sedation/Analgesia - First 15 Minutes Journal of Provided Format (Conscious) Sedation/Analgesia - Each Subsequent 15 Minute Increment Journal of Vaginal Cancer Screening; Pelvic And Clinical Breast Examination Prostate Cancer Screening; Digital Rectal Examination Journal of Colorectal Cancer Screening; Plexible Sigmoidoscopy Journal of Colorectal Cancer Screening; Colonoscopy On Individual At High Risk Journal of Colorectal Cancer Screening; Alternative To G0104, Screening Sigmoidoscopy, Barium Enema Journal of Glaucoma Screening For High Risk Patients Furnished By An Optometrist Or Ophthalmologist	\$30.		
Deep Sedation/General Anesthesia - Each Subsequent 15 Minute Increment Juntania Intravenous Moderate (Conscious) Sedation/Analgesia - First 15 Minutes Intravenous Moderate (Conscious) Sedation/Analgesia - Each Subsequent 15 Minute Increment Cervical Or Vaginal Cancer Screening; Pelvic And Clinical Breast Examination Prostate Cancer Screening; Digital Rectal Examination Colorectal Cancer Screening; Flexible Sigmoidoscopy Colorectal Cancer Screening; Colonoscopy On Individual At High Risk Colorectal Cancer Screening; Alternative To G0104, Screening Sigmoidoscopy, Barium Enema Glaucoma Screening For High Risk Patients Furnished By An Optometrist Or Ophthalmologist	\$275.		
Intravenous Moderate (Conscious) Sedation/Analgesia - First 15 Minutes	\$117.2		
Intravenous Moderate (Conscious) Sedation/Analgesia - Each Subsequent 15 Minute Increment	\$117.2		
Cervical Or Vaginal Cancer Screening; Pelvic And Clinical Breast Examination	\$89.7	i i	
Prostate Cancer Screening; Digital Rectal Examination	\$89.7	i i	
Colorectal Cancer Screening; Flexible Sigmoidoscopy	\$47.0 \$22.0		
0105 Colorectal Cancer Screening; Colonoscopy On Individual At High Risk 0106 Colorectal Cancer Screening; Alternative To G0104, Screening Sigmoidoscopy, Barium Enema 0117 Glaucoma Screening For High Risk Patients Furnished By An Optometrist Or Ophthalmologist	\$178.	ÿ. ÿ.	
0106 Colorectal Cancer Screening; Alternative To G0104, Screening Sigmoidoscopy, Barium Enema 0117 Glaucoma Screening For High Risk Patients Furnished By An Optometrist Or Ophthalmologist	\$500.	ŭ. ŭ. i.	
0117 Glaucoma Screening For High Risk Patients Furnished By An Optometrist Or Ophthalmologist	\$281.8		
	\$60.0		
0118 Glaucoma Screening For High Risk Patient Furnished Under The Direct Supervision Of An Optometrist Or Ophthalomologist	\$40.3	3 Glaucoma Screening For High Risk Patient Furnished Under The Direct Supervision Of An Optometrist Or Ophthalomologist	
0120 Colorectal Cancer Screening; Alternative To G0105, Screening Colonoscopy, Barium Enema.	\$221.		
0121 Colorectal Cancer Screening; Colonoscopy On Individual Not Meeting Criteria For High Risk	\$365.0	Colorectal Cancer Screening; Colonoscopy On Individual Not Meeting Criteria For High Risk	G0121
	\$8.2		G0128
Occupational Therapy Services Requiring The Skills Of A Qualified Occupational Therapist, Furnished As A Component Of A Partial			
0129 Hospitalization Or Intensive Outpatient Treatment Program, Per Session (45 Minutes Or More) Price	rice By Repo	Hospitalization Or Intensive Outpatient Treatment Program, Per Session (45 Minutes Or More)	G0129

Code		F
	Description Control of the Control o	Fee
00400	Single Energy X-Ray Absorptiometry (Sexa) Bone Density Study, One Or More Sites; Appendicular Skeleton (Peripheral) (Eg, Radius, Wrist,	#04.57
G0130	Services Performed By A Qualified Physical Therapist In The Home Health Or Hospice Setting, Each 15 Minutes	\$34.57
	, , , ,	\$28.53
G0152 G0153	, , ,	\$28.53
	7 1 0 0 0 1 07	\$22.62
	Services Of Clinical Social Worker In Home Health Or Hospice Settings, Each 15 Minutes	\$31.32
	Services Of Home Health/Hospice Aide In Home Health Or Hospice Settings, Each 15 Minutes	\$8.92
G0157	Services Performed By A Qualified Physical Therapist Assistant In The Home Health Or Hospice Setting, Each 15 Minutes	\$25.68
G0158	Services Performed By A Qualified Occupational Therapist Assistant In The Home Health Or Hospice Setting, Each 15 Minutes	\$25.68
C0150	Services Performed By A Qualified Physical Therapist, In The Home Health Settin , In Establishment/Delivery Of Safe P.E. Maintenance	Drice By Benert
G0159	Program, Each 15 Min Services Performed By A Qualified Occupational Therapist, In The Home Health Setting, In Establishment/Delivery Of O.T. Maintenance	Price By Report
G0160	Program, Each 15 Min	Price By Report
	External Counterpulsation, Per Treatment Session	\$104.12
	Scheduled Interdisciplinary Team Conference (Minimum Of Three Exclusive Of Patient Care Nursing Staff) With Patient Present	Price By Report
00173	Destruction Of Localized Lesion Of Choroid (For Example, Choroidal Neovascularization); Photocoagulation, Feeder Vessel Technique (One Or	Trice by report
G0186	More Sessions)	Price By Report
00.00	Therapeutic Procedures To Increase Strength Or Endurance Of Respiratory Muscles, Face To Face, One On One, Each 15 Minutes (Includes	r nee by respect
G0237	Monitoring)	\$9.60
	Therapeutic Procedures To Improve Respiratory Function, Other Than Described By G0237, One On One, Face To Face, Per 15 Minutes	*
G0238	(Includes Monitoring)	\$9.60
	Therapeutic Procedures To Improve Respiratory Function Or Increase Strength Or Endurance Of Respiratory Muscles, Two Or More Individuals	
G0239		\$12.21
	Prostate Brachytherapy Using Permanently Implanted Palladium Seeds, Including Transperitoneal Placement Of Needles Or Catheters Into	·
G0256	The Prostate, Cystoscopy And Application Of Permanent Interstitial Radiation Source	Price By Report
	Unscheduled Or Emergency Dialysis Treatment For An Esrd Patient In A Hospital Outpatient Department That Is Not Certified As An Esrd	
G0257	Facility	Price By Report
G0259	Injection Procedure For Sacroiliac Joint; Arthrograpy	Price By Report
G0260	Injection Procedure For Sacroiliac Joint; Provision Of Anesthetic, Steroid And/Or Other Therapeutic Agent And Arthrography	Price By Report
G0268	Removal Of Impacted Cerumen (One Or Both Ears) By Physician On Same Date Of Service As Audiologic Function Testing	\$52.79
	Placement Of Occlusive Device Into Either A Venous Or Arterial Access Site, Post Surgical Or Interventional Procedure (E.G. Angioseal Plug,	
G0269	Vascular Plug)	Price By Report
G0277	Hyperbaric Oxygen Under Pressure, Full Body Chamber, Per 30 Minute Interval	\$170.28
	Iliac Artery Angiography Performed At The Same Time Of Cardiac Catheterization, Includes Catheter Placement, Injection Of Dye, Radiologic	
G0278	Supervision And Interpretation And Production Of Images (List Separately In Addition To Primary Procedure)	\$11.92
G0279	Diagnostic Digital Breast Tomosynthesis, Unilateral Or Bilateral (List Separately In Addition To 77065 Or 77066)	\$47.50
G0288	Reconstruction, Computed Tomographic Angiography Of Aorta For Surgical Planning For Vascular Surgery	\$34.66
	Noncovered Surgical Procedure(S) Using Conscious Sedation, Regional, General Or Spinal Anesthesia In A Medicare Qualifying Clinical Trial,	
G0293	Per Day	Price By Report
G0294	Noncovered Procedure(S) Using Either No Anesthesia Or Local Anesthesia Only, In A Medicare Qualifying Clinical Trial, Per Day	Price By Report
G0298	Insertion Of Dual Chamber Pacing Cardioverter Defibrillator Pulse Generator	Price By Report
G0299	Direct Skilled Nursing Services Of A Registered Nurse (Rn) In The Home Health Or Hospice Setting, Each 15 Minutes	\$21.42
G0300	Direct Skilled Nursing Services Of A Licensed Practical Nurse (Lpn) In The Home Health Or Hospice Setting, Each 15 Minutes	\$17.82
	Pre-Operative Pulmonary Surgery Services For Preparation For Lyrs, Complete Course Of Services, To Include A Minimum Of 16 Days Of	
G0302	Services	Price By Report
G0303	Pre-Operative Pulmonary Surgery Services For Preparation For Lvrs, 10 To 15 Days Of Services	Price By Report
G0304	Pre-Operative Pulmonary Surgery Services For Preparation For Lvrs, 1 To 9 Days Of Services	Price By Report
G0305	Post-Discharge Pulmonary Surgery Services After Lvrs, Minimum Of 6 Days Of Services	Price By Report
	Immunization Counseling By A Physician Or Other Qualify Ed Health Care Professional When The Vaccine(S) Is Not Administered On The	
G0312	Same Date Of Service For Ages Under 21, 5 To 15 Mins Time (This Code Is Used For Medicaid Billing Purposes)	\$5.79
00012	Immunization Counseling By A Physician Or Other Qualified Health Care Professional When The Vaccine(S) Is Not Administered On The	ψ5.75
G0313		A44 ==
000.0		\$11.571
	Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 16-30 Mins Time (This	\$11.57
G0314	Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 16-30 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt)	
G0314		\$11.57 \$11.57
G0314 G0315	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt)	\$11.57
	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt)	
	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This	\$11.57
	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service	\$11.57
	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The	\$11.57
	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233,	\$11.57
	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233, And 99236 For Hospital Inpatient Or Observation Care Evaluation And Management Services). (Do Not Report G0316 On The Same Date Of	\$11.57
G0315	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233, And 99236 For Hospital Inpatient Or Observation Care Evaluation And Management Services). (Do Not Report G0316 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418, 99415, 99416). (Do Not Report G0316 For Any Time Unit Less Than 15 Minutes)	\$11.57 \$5.51
G0315	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233, And 99236 For Hospital Inpatient Or Observation Care Evaluation And Management Services). (Do Not Report G0316 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418, 99415, 99416). (Do Not Report G0316 For Any	\$11.57 \$5.51
G0315	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233, And 99236 For Hospital Inpatient Or Observation Care Evaluation And Management Services). (Do Not Report G0316 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418, 99415, 99416). (Do Not Report G0316 For Any Time Unit Less Than 15 Minutes) Prolonged Nursing Facility Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary	\$11.57 \$5.51
G0315	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233, And 99236 For Hospital Inpatient Or Observation Care Evaluation And Management Services). (Do Not Report G0316 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418, 99415, 99416). (Do Not Report G0316 For Any Time Unit Less Than 15 Minutes) Prolonged Nursing Facility Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified	\$11.57 \$5.51
G0315	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233, And 99236 For Hospital Inpatient Or Observation Care Evaluation And Management Services). (Do Not Report G0316 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418, 99415, 99416). (Do Not Report G0316 For Any Time Unit Less Than 15 Minutes) Prolonged Nursing Facility Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99306, 99310 For Nursing Facility Evaluation And Management Services). (Do Not Report G0317 On The Same Date Of Service As Other Prolonged Services For Evaluation	\$11.57 \$5.51
G0315	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233, And 99236 For Hospital Inpatient Or Observation Care Evaluation And Management Services). (Do Not Report G0316 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418, 99415, 99416). (Do Not Report G0316 For Any Time Unit Less Than 15 Minutes) Prolonged Nursing Facility Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99306, 99310 For Nursing Facility Evaluation And Management Services). (Do Not Report G0317 On The Same Date Of Service As Other Prolonged Services For Evaluation	\$11.57 \$5.51 \$27.89
G0315	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233, And 99236 For Hospital Inpatient Or Observation Care Evaluation And Management Services). (Do Not Report G0316 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418, 99415, 99416). (Do Not Report G0316 For Any Time Unit Less Than 15 Minutes) Prolonged Nursing Facility Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99306, 99310 For Nursing Facility Evaluation And Management Services). (Do Not Report G0317 On The Same Date Of Service As Other Prolonged Services For Evaluation	\$11.57 \$5.51 \$27.89
G0315	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233, And 99236 For Hospital Inpatient Or Observation Care Evaluation And Management Services). (Do Not Report G0316 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418, 99415, 99416). (Do Not Report G0316 For Any Time Unit Less Than 15 Minutes) Prolonged Nursing Facility Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99306, 99310 For Nursing Facility Evaluation And Management Services). (Do Not Report G0317 For Any Time Unit Less Than 15 Minutes)	\$11.57 \$5.51 \$27.89
G0315	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233, And 99236 For Hospital Inpatient Or Observation Care Evaluation And Management Services). (Do Not Report G0316 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418, 99415, 99416). (Do Not Report G0316 For Any Time Unit Less Than 15 Minutes) Prolonged Nursing Facility Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99306, 99310 For Nursing Facility Evaluation And Management Services). (Do Not Report G0317 For Any Time Unit Less Than 15 Minutes) Prolonged Home Or Residence Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service (When The Primary Service) Beyond The Total Time For The Primary Service (When The Primary Service).	\$11.57 \$5.51 \$27.89
G0315	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233, And 99236 For Hospital Inpatient Or Observation Care Evaluation And Management Services). (Do Not Report G0316 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418, 99415, 99416). (Do Not Report G0316 For Any Time Unit Less Than 15 Minutes) Prolonged Nursing Facility Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99306, 99310 For Nursing Facility Evaluation And Management Services). (Do Not Report G0317 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418). (Do Not Report G0317 For Any Time Unit Less Than 15 Minutes) Prolonged Home Or Residence Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified	\$11.57 \$5.51 \$27.89
G0315	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233, And 99236 For Hospital Inpatient Or Observation Care Evaluation And Management Services). (Do Not Report G0316 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418, 99415, 99416). (Do Not Report G0316 For Any Time Unit Less Than 15 Minutes) Prolonged Nursing Facility Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99306, 99310 For Nursing Facility Evaluation And Management Services). (Do Not Report G0317 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418). (Do Not Report G0317 For Any Time Unit Less Than 15 Minutes) Prolonged Home Or Residence Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99345, 99350 For H	\$11.57 \$5.51 \$27.89
G0315 G0316 G0317	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233, And 99236 For Hospital Inpatient Or Observation Care Evaluation And Management Services). (Do Not Report G0316 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418, 99415, 99416). (Do Not Report G0316 For Any Time Unit Less Than 15 Minutes) Prolonged Nursing Facility Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99306, 99310 For Nursing Facility Evaluation And Management Services). (Do Not Report G0317 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418). (Do Not Report G0317 For Any Time Unit Less Than 15 Minutes) Prolonged Home Or Residence Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Addition To Cpt Codes 99345, 99350 For Home Or Residence Evaluation And Management Services). (Do Not Report G0318 On The Same Date Of Service As Other Prolonged Services For E	\$11.57 \$5.51 \$27.89 \$27.89
G0315 G0316 G0317	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233, And 99236 For Hospital Inpatient Or Observation Care Evaluation And Management Services). (Do Not Report G0316 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418, 99415, 99416). (Do Not Report G0316 For Any Time Unit Less Than 15 Minutes) Prolonged Nursing Facility Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99306, 99310 For Nursing Facility Evaluation And Management Services). (Do Not Report G0317 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418). (Do Not Report G0317 For Any Time Unit Less Than 15 Minutes) Prolonged Home Or Residence Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99345, 99350 For H	\$11.57 \$5.51 \$27.89 \$27.89
G0316 G0317	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233, And 99236 For Hospital Inpatient Or Observation Care Evaluation And Management Services). (Do Not Report G0316 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418, 99415, 99416). (Do Not Report G0316 For Any Time Unit Less Than 15 Minutes) Prolonged Nursing Facility Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99306, 99310 For Nursing Facility Evaluation And Management Services). (Do Not Report G0317 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418). (Do Not Report G0317 For Any Time Unit Less Than 15 Minutes) Prolonged Home Or Residence Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Addition To Cpt Codes 99345, 99350 For Home Or Residence Evaluation And Management Services). (Do Not Report G0318 On The Same Date Of Service As Other Prolonged Services For E	\$11.57 \$5.51 \$27.89 \$27.89
G0316 G0317 G0318 G0330	Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt) Prolonged Hospital Inpatient Or Observation Care Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99223, 99233, And 99236 For Hospital Inpatient Or Observation Care Evaluation And Management Services). (Do Not Report G0316 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418, 99415, 99416). (Do Not Report G0316 For Any Time Unit Less Than 15 Minutes) Prolonged Nursing Facility Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99306, 99310 For Nursing Facility Evaluation And Management Services). (Do Not Report G0317 On The Same Date Of Service As Other Prolonged Services For Evaluation And Management 99358, 99359, 99418). (Do Not Report G0317 For Any Time Unit Less Than 15 Minutes) Prolonged Home Or Residence Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99345, 99350 For Home	\$11.57 \$5.51 \$27.89 \$27.89 Price By Report

Code	Description	Fee
	Laparoscopy For Islet Cell Transplant, Includes Portal Vein Catheterization And Infusion	\$672.51
	Laparotomy For Islet Cell Transplant, Includes Portal Vein Catheterization And Infusion	\$1,102.92
	Hospital Observation Service, Per Hour	Price By Report
	Direct Admission Of Patient For Hospital Observation Care	Price By Report
	Respiratory Effort And Oxygen Saturation	Price By Report
G0400	Home Sleep Test (Hst) With Type Iv Portable Monitor, Unattended; Minimum Of 3 Channels Electrocardiogram, Routine Ecq With 12 Leads; Tracing Only, Without Interpretation And Report, Performed As A Screening For The Initial	Price By Report
G0404	Preventive Physical Examination	\$5.67
00101	Electrocardiogram, Routine Ecg With 12 Leads; Interpretation And Report Only, Performed As A Screening For The Initial Preventive Physical	ψ0.07
G0405	Examination	\$7.63
	Group Psychotherapy Other Than Of A Multiple-Family Group, In A Partial Hospitalization Or Intensive Outpatient Setting, Approximately 45 To	
	50 Minutes	Price By Report
G0411	Interactive Group Psychotherapy, In A Partial Hospitalization Or Intensive Outpatient Setting, Approximately 45 To 50 Minutes Once Treatment Of Ilica Spins (S), Tubersoity Application Or Ilica Wing Freetway (S), Unileteral Or Pilisteral For Polyin Bone Freetway Petterra	Price By Report
G0412	Open Treatment Of Iliac Spine(S), Tuberosity Avulsion, Or Iliac Wing Fracture(S), Unilateral Or Bilateral For Pelvic Bone Fracture Patterns Which Do Not Disrupt The Pelvic Ring Includes Internal Fixation, When Performed	\$658.41
00412	Percutaneous Skeletal Fixation Of Posterior Pelvic Bone Fracture And/Or Dislocation, For Fracture Patterns Which Disrupt The Pelvic Ring,	ψ030.+1
G0413	Unilateral Or Bilateral, (Includes Ilium, Sacroiliac Joint And/Or Sacrum)	\$1,070.51
	Bilateral, Includes Internal Fixation When Performed (Includes Pubic Symphysis And/Or Superior/Inferior Rami)	\$1,010.92
	Bilateral, Includes Internal Fixation, When Performed (Includes Ilium, Sacroiliac Joint And/Or Sacrum)	\$1,236.59
G0416	Surgical Pathology, Gross And Microscopic Examinations, For Prostate Needle Biopsy, Any Method	\$336.45
C0420	Dermal Filler Injection(S) For The Treatment Of Facial Lipodystrophy Syndrome (Lds) (E.G., As A Result Of Highly Active Antiretroviral Therapy)	\$91.18
	And Guidance On How To Change Sexual Behavior; Performed Semi-Annually, 30 Minutes	\$25.31
	Annual Face-To-Face Obesity Screening, 15 Minutes	Price By Report
	Collection Of Venous Blood By Venipuncture Or Urine Sample By Catheterization From An Individual In A Skilled Nursing Facility (Snf) Or By A	
G0471	Laboratory On Behalf Of A Home Health Agency (Hha)	\$10.83
G0498	Pump/Supplies, With Continuation Of The Infusion In The Community Setting (E.G., Home, Domiciliary, Rest Home Or Assisted Living	Price By Report
	Services Performed By A Physical Therapist Assistant In The Home Health Setting In The Delivery Of A Safe And Effective Physical Therapy	
G2168	Maintenance Program, Each 15 Minutes	Price By Report
00400	Services Performed By An Occupational Therapist Assistant In The Home Health Setting In The Delivery Of A Safe And Effective Occupational	Delete Des Description
	Therapy Maintenance Program, Each 15 Minutes Ultrasonic Guidance For Placement Of Radiation Therapy Fields	Price By Report \$126.63
	Stereoscopic X-Ray Guidance For Localization Of Target Volume For The Delivery Of Radiation Therapy	\$82.90
	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: up to 5 mev	\$142.04
	Radiation Treatment Delivery, Single Treatment Area, Single Port Or Parallel Opposed Ports, Simple Blocks Or No Blocks: 6-10 Mev	\$127.65
G6005	Radiation Treatment Delivery, Single Treatment Area, Single Port Or Parallel Opposed Ports, Simple Blocks Or No Blocks: 11-19 Mev	\$127.65
G6006	Radiation Treatment Delivery, Single Treatment Area, Single Port Or Parallel Opposed Ports, Simple Blocks Or No Blocks: 20 Mev Or Greater	\$127.65
G6007	Radiation Treatment Delivery, 2 Separate Treatment Areas, 3 Or More Ports On A Single Treatment Area, Use Of Multiple Blocks: Up To 5 Mev	\$235.25
G6008	Radiation Treatment Delivery, 2 Separate Treatment Areas, 3 Or More Ports On A Single Treatment Area, Use Of Multiple Blocks: 6-10 Mev	\$175.73
CEOOO	Radiation Treatment Delivery, 2 Separate Treatment Areas, 3 Or More Ports On A Single Treatment Area, Use Of Multiple Blocks: 11-19 Mev	¢175.40
30009	Radiation Treatment Delivery, 2 Separate Treatment Areas, 3 Or More Ports On A Single Treatment Area, Use Of Multiple Blocks: 11-19 MeV Or	\$175.40
G6010		\$174.42
	Radiation Treatment Delivery,3 Or More Separate Treatment Areas, Custom Blocking, Tangential Ports, Wedges, Rotational Beam,	·
G6011	Compensators, Electron Beam; Up To 5 Mev	\$232.74
	Radiation Treatment Delivery,3 Or More Separate Treatment Areas, Custom Blocking, Tangential Ports, Wedges, Rotational Beam,	
G6012	Compensators, Electron Beam; 6-10 Mev Registron Treatment Delivery 2 Or Mere Separate Treatment Areas, Custom Blacking, Tangential Botto, Wedges, Betational Boom	\$253.87
G6013	Radiation Treatment Delivery,3 Or More Separate Treatment Areas, Custom Blocking, Tangential Ports, Wedges, Rotational Beam, Compensators, Electron Beam; 11-19 Mev	\$233.08
000.0	Radiation Treatment Delivery,3 Or More Separate Treatment Areas, Custom Blocking, Tangential Ports, Wedges, Rotational Beam,	\$200.00
G6014	Compensators, Electron Beam; 20 Mev Or Greater	\$231.77
000:-	Intensity Modulated Treatment Delivery, Single Or Multiple Fields/Arcs, Via Narrow Spatially And Temporally Modulated Beams, Binary, Dynamic	*
G6015	Mlc, Per Treatment Session Compensator-Based Beam Modulation Treatment Delivery Of Inverse Planned Treatment Using 3 Or More High Resolution (Milled Or Cast)	\$353.43
G6016	Compensator-Based Beam Modulation Treatment Delivery Of Inverse Planned Treatment Using 3 Of More High Resolution (Milled Of Cast) Compensator, Convergent Beam Modulated Fields, Per Treatment Session	\$352.98
23010	Intra-Fraction Localization And Tracking Of Target Or Patient Motion During Delivery Of Radiation Therapy (Eg,3D Positional Tracking, Gating,	ψ002.30
	3D Surface Tracking), Each Fraction Of Treatment	Price By Report
	Screening For Depression Is Documented As Being Positive And A Follow-Up Plan Is Documented	\$0.01
G8510	Screening For Depression Is Documented As Negative, A Follow-Up Plan Is Not Required	\$0.01
C9664	Risk-Adjusted Functional Status Change Residual Score For The Shoulder Impairment Successfully Calculated And The Score Was Less Than Zero (< 0)	Price Py Pennat
G8664 G9151	MAPCP Demonstration - State Provided Services	Price By Report \$200.00
G9152	MAPCP Demonstration - Community Health Teams	\$100.00
K1034	Provision Of Covid-19 Test, Nonprescription Self-Administered And Self-Collected Use, Fda Approved, Authorized Or Cleared, One Test Count	Price By Report
	Administration Of Pneumococcal, Influenza, Hepatitis B, And/Or Covid-19 Vaccine Inside A Patient'S Home; Reported Only Once Per Individual	**=
M0201	Home Per Date Of Service When Such Vaccine Administration(S) Are Performed At The Patient'S Home Childrens Care Rehab Development Only (Lifescape)	\$35.86
	Cnildrens Care Renab Development Only (Lifescape) Cardiokymography	\$41.86 \$16.25
	Chemotherapy Administration By Other Than Infusion Technique Only (Eg Subcutaneous, Intramuscular, Push), Per Visit	Price By Report
	Chemotherapy Administration By Infusion Technique Only, Per Visit	Price By Report
Q0085	Chemotherapy Administration By Both Infusion Technique And Other Techique(S) (Eg Subcutaneous, Intramuscular, Push), Per Visit	Price By Report
	Screening Papanicolaou Smear; Obtaining, Preparing And Conveyance Of Cervical Or Vaginal Smear To Laboratory	\$29.83
Q0488 Q0507	Power Pack Base For Use With Electric Ventricular Assist Device, Replacement Only	Price By Report
	Miscellaneous Supply Or Accessory For Use With An External Ventricular Assist Device	Price By Report

	Description Microllandous Supply Or Accessory For Lica With An Implanted Ventricular Acciet Davids	Fee
Q0508	Miscellaneous Supply Or Accessory For Use With An Implanted Ventricular Assist Device Miscellaneous Supply Or Accessory For Use With Any Implanted Ventricular Assist Device For Which Payment Was Not Made Under Medicare	Price By Report
Q0509	Miscellanieus Supply of Accessory of Ose With Arty Implanted Ventricular Assist Device For Which Fayment was Not wide Order Medicare Part A	Price By Report
	New Technology Intraocular Lens Category 4 As Defined In Federal Register Notice	Price By Report
	New Technology Intraocular Lens Category 5 As Defined In Federal Register Notice	Price By Report
Q2004	Irrigation Solution For Treatment Of Bladder Calculi, For Example Renacidin Per 500Ml	Price By Report
Q2052	Services, Supplies And Accessories Used In The Home For The Administration Of Intravenous Immune Globulin (Ivig)	Price By Report
Q3001	Radioelements For Brachytherapy, Any Type	Price By Report
	Telehealth Originating Site Facility Fee	\$30.49
	Collagen Skin Test	\$0.01
	Casting Supplies, Body Cast Adult, With Or Without Head, Plaster	\$52.38
	Cast Supplies, Body Cast Adult, With Or Without Head, Fiberglass	\$197.90
	Cast Supplies, Shoulder Cast, Adult (11 Yrs+), Plaster	\$37.60
	Cast Supplies, Shoulder, Adult (11 Years+), Fiberglass	\$130.20
	Cast Supplies, Long Arm Cast, Adult (11 Years+), Plaster Cast Supplies, Long Arm Cast, Adult (11 Years+), Fiberglass.	\$13.87 \$32.68
	Cast Supplies, Long Arm Cast, Addit (11 Tears +), Floetglass. Cast Supplies, Long Arm Cast, Pediatric (0-10 Years), Plaster	\$6.98
	Cast Supplies, Long Arm Cast, Pediatric (0 - 10 Years), Fiberglass	\$41.23
	Cast Supplies, Short Arm Cast, Adult (11 Years +), Plaster	\$9.32
	Cast Supplies, Short Arm Cast, Adult (11 Years +), Fiberglass	\$22.16
	Cast Supplies, Short Arm Cast, Pediatric (0-10 Years), Plaster	\$4.62
	Cast Supplies, Short Arm Cast, Pediatric (0 - 10 Years), Fiberglass	\$26.42
	Cast Supplies, Gauntlet Cast (Includes Lower Forearm And Hand), Adult (11 Years +), Plaster	\$16.86
	Cast Supplies, Gauntlet Cast (Inculdes Lower Forearm And Hand), Adult (11 Years +), Fiberglass	\$28.59
	Cast Supplies, Gauntlet Cast (Includes Lower Forearm And Hand), Pediatric (0 -10 Years), Plaster	\$8.44
	Cast Supplies, Gauntlet Cast (Inculdes Lower Forearm And Hand), Pediatric (0-10 Years), Fiberglass	\$14.30
	Cast Supplies, Long Arm Splint, Adult (11 Years+), Plaster	\$9.47
Q4018	Cast Supplies, Long Arm Splint, Adult (11 Years+), Fiberglass	\$15.63
Q4019	Cast Supplies, Long Arm Splint, Pediatric (0-10 Years), Plaster	\$4.90
Q4020	Cast Supplies, Long Arm Splint, Pediatric (0-10 Years), Fiberglass	\$7.82
Q4021	Cast Supplies, Short Arm Splint, Adult (11 Years+), Plaster	\$7.27
Q4022	Cast Supplies, Short Arm Splint, Adult (11 Years+), Fiberglass	\$13.10
Q4023	Cast Supplies, Short Arm Splint, Pediatric (0-10 Years), Plaster	\$3.65
	Cast Supplies, Short Arm Splint, Pediatric (0-10 Years), Fiberglass	\$6.55
	Cast Supplies, Hip Spica (One Or Both Legs), Adult (11 Years+), Plaster	\$40.41
	Cast Supplies, Hip Spica (One Or Both Legs), Adult (11 Years+), Fiberglass	\$126.24
	Cast Supplies, Hip Spica (One Or Both Legs), Pediatric (0-10 Years), Plaster	\$20.23
	Cast Supplies, Hip Spica (One Or Both Legs), Pediatric (0-10 Years), Fiberglass	\$63.16
	Cast Supplies, Long Leg Cast, Adult (11 Years+), Plaster	\$30.92
	Cast Supplies, Long Leg Cast, Adult (11 Years+), Fiberglass	\$81.93
	Cast Supplies, Long Leg Cast, Pediatric (0-10 Years), Plaster Cast Supplies, Long Leg Cast, Pediatric (0-10 Years) Fiberglass	\$15.55
	Cast Supplies, Long Leg Cylinder Cast, Adult (11 Years+), Plaster	\$40.96 \$28.85
	Cast Supplies, Long Leg Cylinder Cast, Adult (11 Years+), Plaster Cast Supplies, Lond Leg Cylinder Cast, Adult (11 Years+), Fiberglass	\$69.73
	Cast Supplies, Long Leg Cylinder Cast, Pediatric (0-10 Years), Plaster	\$14.42
	Cast Supplies, Long Leg Cylinder Cast, Pediatric (0-10 Years), Fiberglass	\$38.52
	Cast Supplies Short Leg Cast, Adult (11 Years+), Plaster	\$17.08
Q4038	Cast Supplies, Short Leg Cast, Adult (11 Years+), Fiberglass	\$44.34
	Cast Supplies, Short Leg Cast, Pediatric (0-10 Years), Plaster	\$8.87
	Cast Supplies, Short Leg Cast, Pediatric (0-10 Years), Fiberglass	\$22.19
	Cast Supplies, Long Leg Splint, Adult (11 Years+), Plaster	\$21.53
Q4042	Cast Supplies, Long Leg Splint, Adult (11 Years+), Fiberglass	\$36.75
	Cast Supplies, Long Leg Splint, Pediatric (0-10 Years), Plaster	\$10.41
Q4044	Cast Supplies, Long Leg Splint, Pediatric (0-10 Years), Fiberglass	\$18.40
	Cast Supplies, Short Leg Splint, Adult (11 Years+), Plaster	\$12.51
	Cast Supplies, Short Leg Splint, Adult (11 Years+), Fiberglass	\$20.10
	Cast Supplies, Short Leg Splint, Pediatric (0-10 Years), Plaster	\$6.24
	Cast Supplies, Short Leg Splint, Pediatric (0-10 Years), Fiberglass)	\$10.05
	Finger Splint, Static	\$2.27
	Splint Supplies, Miscellaneous (Includes Thermoplastics, Strapping, Fasteners, Padding And Other Supplies)	Price By Report
	Signature Apatch, Per Square Centimeter	Price By Report
	Tag, Per Square Centimeter	Price By Report
	American Amnion Ac Tri-Layer, Per Square Centimeter American Amnion Ac, Per Square Centimeter	Price By Report
	' I	Price By Report
	American Amnion, Per Square Centimeter Sanopellis, Per Square Centimeter	Price By Report
	Via Matrix, Per Square Centimeter	Price By Report
	Procenta, Per 100 Mg	Price By Report Price By Report
	Medical Home Program, Comprehensive Care Coordination And Planning, Initial Plan	\$100.00
	Medical Home Program, Comprehensive Care Coordination And Planning, Maintenance Of Plan	\$50.00
	Adjustment Of Gastric Band Diameter Via Subcutaneous Port By Injection Or Aspiration Of Saline	Price By Report
	Repair, Congenital Cystic Adenomatoid Malformation In The Fetus, Procedure Performed In Utero	Price By Report
	Emergency Response System, Installation And Testing	\$37.75
	Home Delivered Meals, Including Preparation Per Meal	\$10.78
	Home Infusion Therapy, Catheter Care / Maintenance, Simple (Single Lumen), Includes Administrative Services, Professional Pharmacy	
S5498	Services, Care Coordination And All Necessary Supplies And Equipment, (Drugs And Nursing Visits Coded Separately), Pe	\$73.23
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Code	Description	Fee
05504	Home Infusion Therapy, Catheter Care / Maintenance, Complex (More Than One Lumen), Includes Administrative Services, Professional	* 40.05
	Pharmacy Services, Care Coordination, And All Necessary Supplies And Equipment (Drugs And Nursing Visits Coded Separately), Pe Resuscitation Bag (For Use By Patient On Artificial Respiration During Power Failure Or Other Catastrophic Event)	\$49.35 Price By Report
	Home Infusion Therapy, Total Parenteral Nutrition (Tpn); Administrative Services, Professional Pharmacy Services, Care Coordination, And All	, , ,
	Necessary Supplies And Equipment (Includes Standard Tpn Formula - Lipids, Specialty Amino Acid Formulas, Drugs, And Nu	Price By Report
	Medical Foods For Non-Inborn Errors Of Metabolism Medical Food Nutritionally Complete, Administered Orally, Providing 100% Of Nutritional Intake	Price By Report
	Modified Solid Food Supplements For Inborn Errors Of Metabolism	Price By Report Price By Report
	Medical Foods For Inborn Errors Of Metabolism	\$8.20
S9484	Crisis Intervention Mental Health Services, Per Hour	\$31.31
S9500	Home Infusion Therapy, Antibiotic, Antiviral, Or Antifungal Therapy; Once Every 24 Hours; Administrative Services, Professional Pharmacy Services, Care Coordination, And All Necessary Supplies And Equipment (Drugs And Nursing Visits Coded Separately), Pe	\$284.06
S9501	Home Infusion Therapy, Antibiotic, Antiviral, Or Antifungal Therapy; Once Every 12 Hours; Administrative Services, Professional Pharmacy Services, Care Coordination, And All Necessary Supplies And Equipment (Drugs And Nursing Visits Coded Separately), Pe	\$301.82
S9502	Home Infusion Therapy, Antibiotic, Antiviral, Or Antifungal Therapy; Once Every 8 Hours, Administrative Services, Professional Pharmacy Services, Care Coordination, And All Necessary Supplies And Equipment (Drugs And Nursing Visits Coded Separately), Pe	\$346.64
S9503	Home Infusion Therapy, Antibiotic, Antiviral, Or Antifungal; Once Every 6 Hours; Administrative Services, Professional Pharmacy Services, Care Coordination, And All Necessary Supplies And Equipment (Drugs And Nursing Visits Coded Separately), Pe Home Infusion Therapy, Antibiotic, Antiviral, Or Antifungal; Once Every 4 Hours; Administrative Services, Professional Pharmacy Services,	\$538.62
	Care Coordination, And All Necessary Supplies And Equipment (Drugs And Nursing Visits Coded Separately), Pe	\$505.73
	Nursing Evaluation Or Assessment Administration Of Oral, Intramuscular And/Or Subcutaneous Medication By Health Care Agency/Professional, Per Visit	\$10.00 Price By Report
	Administration Of Oral, Intramuscular And/Or Subcutaneous Medication By Health Care Agency/Professional, Per Visit Administration Of Medication, Other Than Oral And/Or Injectable, By A Health Care Agency/Professional, Per Visit	Price By Report
	Nonemergency Transportation; Encounter/Trip	\$525.00
	Targeted Case Management; Per Month	Price By Report
	Frames, Complete Not Otherwise Classified, Single Vision Lens	\$72.58 \$39.86
V2199 V2221	Lenticular Lens, Per Lens, Bifocal	\$93.67
	Specialty Bifocal (By Report)	\$59.81
	Specialty Trifocal (By Report)	\$80.83
	Variable Asphericity Lens, Single Vision, Full Field, Glass Or Plastic, Per Lens	\$128.30
	Variable Asphericity Lens, Bifocal, Full Field, Glass Or Plastic, Per Lens Contact Lens, Gas Permeable, Spherical, Per Lens	\$132.00 \$124.25
	Contact Lens Hydrophilic, Spherical, Per Lens	\$104.60
V2521	Contact Lens Hydrophilic, Toric, Or Prism Ballast, Per Lens	\$202.58
	Contact Lens, Hydrophilic, Spherical, Photochromic Additive, Per Lens	\$124.09
	Contact Lens, Scleral, Per Lens (For Contact Lens Modification, See 92325) Contact Lens, Scleral, Gas Permeable, Per Lens (For Contact Lens Modification, See 92325)	\$249.56 \$568.96
	Contact Lens, Other Type	\$25.86
	Prosthetic Eye, Plastic, Custom	\$1,184.70
	Polishing/Resurfacing Of Ocular Prosthesis	\$75.94
	Enlargement Of Ocular Prosthesis	\$526.01
	Reduction Of Ocular Prosthesis Scleral Cover Shell	\$242.70 \$1,641.70
	Fabrication And Fitting Of Ocular Conformer	\$397.76
	Anterior Chamber Intraocular Lens	\$122.38
	Iris Supported Intraocular Lens	\$122.38
	Posterior Chamber Intraocular Lens Slob Off Prices Or Plactic Park Lens	\$164.99
	Slab Off Prism, Glass Or Plastic. Per Lens Prism, Per Lens	\$82.97 \$11.25
	Press-On Lens, Fresnell Prism, Per Lens	\$25.98
V2744	Tint, Photochromatic, Per Lens	\$17.49
	Addition To Lens; Tint, Any Color, Solid, Gradient Or Equal, Excludes Photochromatic, Any Lens Material, Per Lens	\$10.80
	Anti-Reflective Coating, Per Lens	\$19.76 \$79.26
	Progressive Lens, Per Lens Lens, Polycarbonate Or Equal, Any Index, Per Lens	\$78.36 \$36.03
	Processing, Preserving And Transporting Corneal Tissue	Price By Report
	Vision Item Or Service, Miscellaneous	Price By Report
	Basic Audiologic Asmnt - Hearing Asmnt Including The Measuring Of Hearing Acuit &Tests Relating To Air Conduction, Bone Conduction,	.
	Reception Threshold, Speech Discrim, &Acoustic Emittance Tests (Excludes Hearing Aid Asmnt) Childrencare Rehab Develop Only Lifescape Hearing Aid, Monaural, Body Worn, Bone Conduction	\$167.84 Price By Report
	Semi-Implantable Middle Ear Hearing Prosthesis	Price By Report
	Repair/Modification Of Augmentative Communicative System Or Device (Excludes Adaptive Hearing Aid) See 67:16:29:02.10	Price By Report
V5362	Speech Screening	Price By Report
	Language Screening	Price By Report
V5364	Dysphagia Screening	Price By Report